

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

National Rifle Association of America Political Victory Fund

ADDRESS (number and street)

11250 Waples Mill Road

Check if different  
than previously  
reported. (ACC)

Fairfax

VA

22030

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00053553

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☒ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
11 24 2020

through

M M M / D D D / Y Y Y Y Y Y  
12 31 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Owens, G., Robert,

Type or Print Name of Treasurer

Signature of Treasurer

Owens, G., Robert,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
01 29 2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

National Rifle Association of America Political Victory Fund

Report Covering the Period: From: M M / D D / Y Y Y Y Y 11 / 24 / 2020 To: M M / D D / Y Y Y Y Y 12 / 31 / 2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2020		11205259.31
(b) Cash on Hand at Beginning of Reporting Period.....	3594724.98	
(c) Total Receipts (from Line 19) .....	44782.43	12310203.88
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3639507.41	23515463.19
7. Total Disbursements (from Line 31).....	1172421.61	21048377.39
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2467085.80	2467085.80
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

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Page 3

Write or Type Committee Name

National Rifle Association of America Political Victory Fund

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	2	0

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A).....	34191.75	2579368.28
(ii) Unitemized .....	10588.20	8775887.72
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	44779.95	11355256.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	44779.95	11355256.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	950364.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	4450.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2.48	133.88
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	44782.43	12310203.88
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	44782.43	12310203.88

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	- 338.48	148964.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	- 338.48	148964.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	- 1000.00	10759050.00
24. Independent Expenditures (use Schedule E) .....	1161198.88	8978649.39
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	500.00	4680.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	500.00	4680.00
29. Other Disbursements (Including Non-Federal Donations).....	12061.21	1157033.41
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1172421.61	21048377.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1172421.61	21048377.39

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	44779.95	11355256.00
34. Total Contribution Refunds (from Line 28(d)) .....	500.00	4680.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	44279.95	11350576.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	- 338.48	148964.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	950364.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	- 338.48	- 801399.41

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB  
.

Form/Schedule: F3XN  
Transaction ID :

Schedule E Memo Only Entries Do Not Affect Calendar YTD Per Election for Office Sought Totals

Form/Schedule:  
Transaction ID:

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MORIAN, S REED, , ,

Mailing Address 300 JACKSON HILL ST

City  
HOUSTONState  
TXZip Code  
77007-7430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTEDOccupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2020

Transaction ID : 83424742

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROYER, RAYMOND E, , MR,

Mailing Address PO BOX 1079

City

DEERFIELD BEACH

State

FL

Zip Code

33443-1079

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2020

Transaction ID : 83424744

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARTIN, VICTOR R, R, MR,

Mailing Address 8896 OLDHAM WAY

City

WEST PALM BEACH

State

FL

Zip Code

33412-1108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTEDOccupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2020

Transaction ID : 83424748

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 8 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NIEDZIALEK, DAVID, , MR,

Mailing Address 6450 SYRACUSE CT

City  
CHINOState  
CAZip Code  
91710-7106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

Transaction ID : 83424751

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DITCH, DAVID P, , MR,

Mailing Address PO BOX 73

City

HENDERSON HARBOR

State

NY

Zip Code

13651-0073

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELFOccupation (for Individual)  
ENERGY ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2020

Transaction ID : 83424752

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KEZAR, WILLIAM K, , MR,

Mailing Address 11942 OTTAWA PL

City

CHINO

State

CA

Zip Code

91710-6410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAL-P.E.R.SOccupation (for Individual)  
CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

741.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2020

Transaction ID : 83424755

Amount of Each Receipt this Period

18.75

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

218.75

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCARBOROUGH, R, , MR,

Mailing Address 125 BURNEY RD

City  
BRUNSWICKState  
GAZip Code  
31523-6008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 03 / 2020

Transaction ID : 83424757

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MURRAY, MICHAEL J, , MR,

Mailing Address 204 COOLIDGE HILL RD

City  
DIAMOND POINTState  
NYZip Code  
12824-2005FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 07 / 2020

Transaction ID : 83424759

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOSEY, JIMMY, , MR,

Mailing Address 122 CRAWFORD ST

City  
LIVINGSTONState  
TNZip Code  
38570-1304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 07 / 2020

Transaction ID : 83424767

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

90.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 10 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COWAN, ROBERT M, , MR,

Mailing Address 461 LAFAYETTE RD

City  
ROCHESTER

State  
NY

Zip Code  
14609-2934

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 14 / 2020

Transaction ID : 83424768

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GORTON, DAN, , MR,

Mailing Address 1831 SEAFAN CIR

City  
NORTH FORT MYERS

State  
FL

Zip Code  
33903-5036

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

Transaction ID : 83424771

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HODGESON, MICHAEL, , MR,

Mailing Address 8485 S HODGESON RD

City  
GONZALES

State  
LA

Zip Code  
70737-8447

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2020

Transaction ID : 83424776

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

175.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KELLY, THOMAS C., MR,**

Mailing Address 2335 S UNION CT

City  
LAKEWOOD

State  
CO

Zip Code  
80228-4753

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 18 / 2020

**Transaction ID : 83424777**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BISSET, BLAKE, , MR,**

Mailing Address 14529 SE 282ND PL

City  
KENT

State  
WA

Zip Code  
98042-4521

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PRIVATE

Occupation (for Individual)  
AMERICAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 16 / 2020

**Transaction ID : 83424781**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOVAL, TOM J., MR, JR**

Mailing Address 1325 PARKVIEW AVE

City  
WHITING

State  
IN

Zip Code  
46394-1019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARCELORMITTAL

Occupation (for Individual)  
MAINTENANCE TECHNICIAN MECHAI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 15 / 2020

**Transaction ID : 83424788**

Amount of Each Receipt this Period

20.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

290.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WOODHEAD, J M, , MR,

Mailing Address 101 PINEY WOODS CT APT 214

City  
HOUSTONState  
TXZip Code  
77077-5284FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y  
12 / 09 / 2020

Transaction ID : 83424794

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUTTON, GEORGE, , MR,

Mailing Address 330 E KREPPS RD

City  
XENIAState  
OHZip Code  
45385-9736FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTEDOccupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y  
12 / 15 / 2020

Transaction ID : 83424796

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HASKINS, HAROLD, , MR,

Mailing Address 9804 67TH AVENUE CT E

City  
PUYALLUPState  
WAZip Code  
98373-1141FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3405.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y  
11 / 24 / 2020

Transaction ID : 83424801

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

190.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARKLAND, MIKE, , MR,**

Mailing Address 3912 WEDGE CT

City  
LONGMONT

State  
CO

Zip Code  
80503-8304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
UNEMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 21 / 2020

**Transaction ID : 83424804**

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PALMER, ROBERT C, C, MR,**

Mailing Address 1476 EDGEHILL LN

City  
REDLANDS

State  
CA

Zip Code  
92373-6521

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

**Transaction ID : 83424806**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LONGMOOR, RON, , MR,**

Mailing Address 713 S POMEROY

City  
MESA

State  
AZ

Zip Code  
85210-2537

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MOTOROLA COMPUTER GROUP

Occupation (for Individual)  
EMC TEST ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2020

**Transaction ID : 83424810**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

176.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KUTZ, SAMUEL A, , MR,**

Mailing Address 1001 CADMUS RD

City  
POTTSTOWN

State  
PA

Zip Code  
19465-8638

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KUTZ TREE FARM

Occupation (for Individual)  
TREE FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 14 / 2020

**Transaction ID : 83424811**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAILEY, MICHAEL, , MR,**

Mailing Address 18917 N ALAMEDA DR

City  
SURPRISE

State  
AZ

Zip Code  
85387-6452

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2020

**Transaction ID : 83424813**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HOPPER, BILLY B, , MR,**

Mailing Address PO BOX 353

City  
MENTONE

State  
TX

Zip Code  
79754-0353

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 08 / 2020

**Transaction ID : 83424815**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

625.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOPPER, BILLY B, , MR,**

Mailing Address PO BOX 353

City  
MENTONE

State  
TX

Zip Code  
79754-0353

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 23 / 2020

**Transaction ID : 83424816**

Amount of Each Receipt this Period

- 500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEAL, DANIEL C, C, MR,**

Mailing Address 12206 MERIDIAN RD

City  
CHICO

State  
CA

Zip Code  
95973-9651

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
PLUMBER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 30 / 2020

**Transaction ID : 83424820**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRETTER, RICHARD A, , MR,**

Mailing Address PO BOX 6300

City  
PAHRUMP

State  
NV

Zip Code  
89041-6300

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
FACILITATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 26 / 2020

**Transaction ID : 83424824**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

- 350.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KALINOWSKI, JOE, , MR,

Mailing Address PO BOX 86

City  
STANTONState  
MIZip Code  
48888-0086FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELFOccupation (for Individual)  
MECHANIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2020

Transaction ID : 83424828

Amount of Each Receipt this Period

27.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. QUINN, STEPHEN P, , MR,

Mailing Address 2182 N ADAMS ST

City  
TULAREState  
CAZip Code  
93274-8314FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONEOccupation (for Individual)  
UNEMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 04 / 2020

Transaction ID : 83424834

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHOENSTADT, ARTHUR L, , MR,

Mailing Address 22402 MONTERA PL

City  
SALINASState  
CAZip Code  
93908-1028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

655.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 19 / 2020

Transaction ID : 83424836

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

217.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BODMER, JOHN A, , MR,

Mailing Address 12736 S SOMERDOWNS CT

City  
DRAPERState  
UTZip Code  
84020-8501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WESTERN AIRLINESOccupation (for Individual)  
PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 04 / 2020

Transaction ID : 83424838

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ADAMS, CHARLES A, , MR,

Mailing Address 7102 PHYLLIS AVE

City  
SAN JOSEState  
CAZip Code  
95129-3745FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 18 / 2020

Transaction ID : 83424840

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TOMASSO, STEVEN, , MR,

Mailing Address PSC 37 BOX 2359

City  
APOState  
AEZip Code  
09459-0024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
L-3 HARRISOccupation (for Individual)  
FIELD SERVICE SITE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2020

Transaction ID : 83424841

Amount of Each Receipt this Period

34.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

134.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOOVER, JOHN M, M, MR,**

Mailing Address 5190 WARBLER WAY S

City  
CARMEL

State  
IN

Zip Code  
46033-9647

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GYANSYS INC

Occupation (for Individual)  
IT CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 25 / 2020

**Transaction ID : 83424842**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUCCI, P, , MR,**

Mailing Address 315 FOX HOLLOW CIR

City  
PRESCOTT

State  
AZ

Zip Code  
86303-5757

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 03 / 2020

**Transaction ID : 83424847**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRUNKOW, THOMAS M, , MR,**

Mailing Address PO BOX 193

City  
OAKLAND

State  
OR

Zip Code  
97462-0193

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 15 / 2020

**Transaction ID : 83424854**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

145.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANLEY, DARLEN L, , ,**

Mailing Address 2113 TALL PINES CT

City  
CATONSVILLEState  
MDZip Code  
21228-4774FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MDOT SHAOccupation (for Individual)  
LOGISTICS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.00

Date of Receipt

M M	D D	Y Y Y Y
12	15	2020

**Transaction ID : 83424863**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LICHTEN, RICHARD, , MR,**

Mailing Address 27111 REXFORD PL

City  
VALENCIAState  
CAZip Code  
91354-2107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	D D	Y Y Y Y
12	22	2020

**Transaction ID : 83424894**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMS, CHARLES B, , MR,**

Mailing Address 4608 SUNFLOWER WAY NE

City  
SALEMState  
ORZip Code  
97305-2255FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTEDOccupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M	D D	Y Y Y Y
12	10	2020

**Transaction ID : 83424908**

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

145.00

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOWE, JERRY A, , MR,

Mailing Address 12328 SE PARADISE LN

City  
SOUTH BEACHState  
ORZip Code  
97366-9832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2020

Transaction ID : 83424919

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOWE, JERRY A, , MR,

Mailing Address 12328 SE PARADISE LN

City  
SOUTH BEACHState  
ORZip Code  
97366-9832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 24 / 2020

Transaction ID : 83424920

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TALARSKI, GEORGE E, , MR,

Mailing Address 202 HOOVER AVE

City  
LOUISVILLEState  
COZip Code  
80027-2152FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 14 / 2020

Transaction ID : 83424922

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

105.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MULLINS, FRED L, L, MR,

Mailing Address 2155 FEAST ROAD

City

W. MELBOURNE

State

FL

Zip Code

32904-6519

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 01 / 2020

Transaction ID : 83424926

Amount of Each Receipt this Period

65.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KHOO, LUCIUS, , MR,

Mailing Address 5718 CASTANA AVE

City

LAKEWOOD

State

CA

Zip Code

90712-1604

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

DEPARTMENT OF HOMELAND SECURIT

Occupation (for Individual)

OFFICER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2020

Transaction ID : 83424928

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAIN, JACK E, , MR,

Mailing Address 4517 QUARTZ DR NE

City

RIO RANCHO

State

NM

Zip Code

87124-4910

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AHOL SECURITY

Occupation (for Individual)

COURT SECURITY OFFICER

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

358.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 01 / 2020

Transaction ID : 83424929

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

140.00

TOTAL This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NIFONG, ARTHUR E, E, MR, JR

Mailing Address 1233 N 1650 W

City  
PROVOState  
UTZip Code  
84604-2976FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF OREMOccupation (for Individual)  
LIBRARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y  
12 / 14 / 2020

Transaction ID : 83424934

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BERENSON, HAROLD R, , MR,

Mailing Address 3833 LORRAINE RD

City

LARKSPUR

State

CO

Zip Code

80118-5616

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRUE MOUNTAIN GOccupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y  
12 / 15 / 2020

Transaction ID : 83424935

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MATLAGA, ROBERT, , MR,

Mailing Address 1 CHESTNUT ST

City

FREEHOLD

State

NJ

Zip Code

07728-7710

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LRSAOccupation (for Individual)  
MAINTENANCE MECHANIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

339.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y  
11 / 30 / 2020

Transaction ID : 83424937

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

625.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WIENER, JAY, , ,**

Mailing Address 411 W MAIN ST APT 106B

City  
HUNTINGTON

State  
NY

Zip Code  
11743-3214

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
UNEMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83424939**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STOLPA, JAMES, , MR,**

Mailing Address 2103 TEAKWOOD DR

City  
AUSTIN

State  
TX

Zip Code  
78757-7750

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 03 / 2020

**Transaction ID : 83424941**

Amount of Each Receipt this Period

1095.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLEUHER, GEORGE, , MR,**

Mailing Address 916 HILLSIDE DR

City  
LEWISVILLE

State  
TX

Zip Code  
75077-8529

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DR DOLITTLE'S ANIMAL HOSPITAL

Occupation (for Individual)  
GENERAL COUNSEL/PRACTICE MAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

**Transaction ID : 83424944**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1445.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TARRANT, MICHAEL C, , MR,

Mailing Address 13711 WINDMOOR DR

City  
SOUTH LYONState  
MIZip Code  
48178-8149FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2020

Transaction ID : 83424956

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRECHTLING, ANDREW C, , MR,

Mailing Address 1141 GREATHOUSE RD

City  
WAXAHACHIEState  
TXZip Code  
75167-8309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOUTHWEST AIRLINESOccupation (for Individual)  
COMMERCIAL PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

Transaction ID : 83424959

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SEIBEL, RONALD G, , MR,

Mailing Address 1221 W 117TH CT S

City  
JENKSState  
OKZip Code  
74037-5035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USACEOccupation (for Individual)  
CONTRACT SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 16 / 2020

Transaction ID : 83424961

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

775.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ERWINE, LARRY C, C, MR,**

Mailing Address 390 BASS HAVEN DR

City  
DEFUNIAK SPRINGS

State  
FL

Zip Code  
32433-8552

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 10 / 2020

**Transaction ID : 83424962**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARROW, RONALD L, , MR,**

Mailing Address 4131 N 60TH AVE

City  
OMAHA

State  
NE

Zip Code  
68104-2712

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 03 / 2020

**Transaction ID : 83424963**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TILLEY, HARRY G, , MR,**

Mailing Address 1012 GLENFAWN ST

City  
JACKSONVILLE

State  
TX

Zip Code  
75766-9254

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 10 / 2020

**Transaction ID : 83424967**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FOGLE, CHARLES, , MR,

Mailing Address 522 W OIL ST

City  
MONTPELIER

State  
IN

Zip Code  
47359-1245

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 02 / 2020

Transaction ID : 83424968

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RILEY, DANIEL W, , MR,

Mailing Address 33 GREENVALE RD

City  
CHERRY HILL

State  
NJ

Zip Code  
08034-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 03 / 2020

Transaction ID : 83424969

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEADOWS, THOMAS, , MR,

Mailing Address 309 POWDERHORN WAY

City  
MOUNTAIN HOME

State  
AR

Zip Code  
72653-6378

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
UNEMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2020

Transaction ID : 83424972

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

176.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JADUSH, JOHN J, , MR, JR

Mailing Address 4207 BAUM PL

 City  
 TEMPLE

 State  
 PA

 Zip Code  
 19560-1719

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 PA GAME COMMISSION

 Occupation (for Individual)  
 DISPATCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			01			2020			

Transaction ID : 83424974

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JADUSH, JOHN J, , MR, JR

Mailing Address 4207 BAUM PL

 City  
 TEMPLE

 State  
 PA

 Zip Code  
 19560-1719

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 PA GAME COMMISSION

 Occupation (for Individual)  
 DISPATCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2020			

Transaction ID : 83424975

Amount of Each Receipt this Period

16.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVIS, JOHN E, , MR,

Mailing Address 926 POINT PHILLIPS RD

 City  
 BATH

 State  
 PA

 Zip Code  
 18014-9622

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 RETIRED

 Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2020			

Transaction ID : 83424977

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

141.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PRITCHARD, ERIC K, , MR,**

Mailing Address 290 PRITCHARD LN

City

BERKELEY SPRINGS

State

WV

Zip Code

25411-6312

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

ENGINEER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 14 / 2020

**Transaction ID : 83424981**

Amount of Each Receipt this Period

100.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NYE, ROBERT, , MR,**

Mailing Address 1623 CENTRE AVE

City

READING

State

PA

Zip Code

19601-1415

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CNA INSURANCE

Occupation (for Individual)

CLERK

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

**Transaction ID : 83424984**

Amount of Each Receipt this Period

5.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHAMBERS, HARRY J, , MR,**

Mailing Address PO BOX 303

City

JASPER

State

GA

Zip Code

30143-0303

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

**Transaction ID : 83424990**

Amount of Each Receipt this Period

100.00



Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

205.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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FOR LINE NUMBER: PAGE 29 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CANTONWINE, DANIEL, , MR,

Mailing Address 2925 61ST STREET LN

City  
VINTONState  
IAZip Code  
52349-9223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2020

Transaction ID : 83424994

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARLSON, KEVIN T, , MR,

Mailing Address 1506 120TH AVE

City  
HOPKINSState  
MIZip Code  
49328-9626FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTEDOccupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2020

Transaction ID : 83424995

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FOSTER, EDWARD D, , MR, III

Mailing Address PO BOX 2803

City  
LAKE CITYState  
FLZip Code  
32056-2803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MC GRAW HILLOccupation (for Individual)  
SALES REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 12 / 22 / 2020

Transaction ID : 83424996

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

130.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FOSTER, EDWARD D, , MR, III

Mailing Address PO BOX 2803

City  
LAKE CITY

State  
FL

Zip Code  
32056-2803

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MC GRAW HILL

Occupation (for Individual)  
SALES REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 10 / 2020

Transaction ID : 83424997

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRUSE, MARTIN, , MR,

Mailing Address 8927 W CAMP PERRY WESTERN RD

City  
OAK HARBOR

State  
OH

Zip Code  
43449-9790

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 30 / 2020

Transaction ID : 83425001

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RENFRO, CLAY, , MR,

Mailing Address 27452 ESQUINA

City  
MISSION VIEJO

State  
CA

Zip Code  
92691-1109

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 04 / 2020

Transaction ID : 83425002

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

95.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STAELENS, WILLIAM A, , MR,**

Mailing Address 202 E SUNSET WAY

City  
EAST PEORIA

State  
IL

Zip Code  
61611-1061

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 10 / 2020

**Transaction ID : 83425005**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARNOLD, HOWARD L, , MR,**

Mailing Address 4641 CORDOBA WAY

City  
OCEANSIDE

State  
CA

Zip Code  
92056-5105

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

**Transaction ID : 83425007**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REMINGTON, JAMES A, , MR,**

Mailing Address 2671 TRELLIS GREEN CIR

City  
HENRICO

State  
VA

Zip Code  
23233-6984

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 07 / 2020

**Transaction ID : 83425008**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RHEIN, BARRY A, , MR,

Mailing Address 2717 FURLONG RD

City  
DOYLESTOWNState  
PAZip Code  
18902-1607FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2020

Transaction ID : 83425023

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BENNETT, BILL, , MR,

Mailing Address 1238 RUE CAP FERRAT

City  
SAN MARCOSState  
CAZip Code  
92078-7230FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 15 / 2020

Transaction ID : 83425025

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENNETT, BILL, , MR,

Mailing Address 1238 RUE CAP FERRAT

City  
SAN MARCOSState  
CAZip Code  
92078-7230FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 04 / 2020

Transaction ID : 83425026

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

110.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEDGE, DONALD D, , MR, JR

Mailing Address 4784 BLUM DR

City  
FORT WAYNE

State  
IN

Zip Code  
46835-3416

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

Transaction ID : 83425032

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VALENCIA, EDWARD, , MR,

Mailing Address 3244 MARICOPA HWY

City  
OJAI

State  
CA

Zip Code  
93023-9506

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

Transaction ID : 83425033

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DONOHUE, JOHN T, , MR,

Mailing Address 5 POND LN

City  
CHARLTON

State  
MA

Zip Code  
01507-1409

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

509.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 08 / 2020

Transaction ID : 83425034

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

100.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRUNSON, A K, , MR,**

Mailing Address 271 COUNTY ROAD 322

City  
CLEVELAND

State  
TX

Zip Code  
77327-8505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 29 / 2020

Transaction ID : 83425037

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAILEY, MARK, , MR,**

Mailing Address 4010 OAK ST

City  
HUNTINGTOWN

State  
MD

Zip Code  
20639-9361

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EFSI

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2020

Transaction ID : 83425038

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAILEY, MARK, , MR,**

Mailing Address 4010 OAK ST

City  
HUNTINGTOWN

State  
MD

Zip Code  
20639-9361

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EFSI

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 26 / 2020

Transaction ID : 83425039

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1055.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MATHEWS, MARK, , MR,

Mailing Address PO BOX 23603

City  
KNOXVILLE

State  
TN

Zip Code  
37933-1603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 23 / 2020

Transaction ID : 83425041

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAAS, RONALD H, , MR,

Mailing Address 9891 S 550 W

City  
WINAMAC

State  
IN

Zip Code  
46996-8466

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 07 / 2020

Transaction ID : 83425056

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, LAWRENCE D, , MR,

Mailing Address 7081 MAGIC MOMENT LN

City  
LAS VEGAS

State  
NV

Zip Code  
89119-0376

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VAREX IMAGING

Occupation (for Individual)  
SOFTWARE ENGINEER CONSULTAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 25 / 2020

Transaction ID : 83425064

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. EVANS, GARY M, , MR,**

Mailing Address 11096 PALA PL

City  
MIRA LOMA

State  
CA

Zip Code  
91752-1728

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 15 / 2020

Transaction ID : 83425065

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANDGRAF, JOHN R, , MR, JR**

Mailing Address 1801 HIGH OAK RD

City  
SAINT LOUIS

State  
MO

Zip Code  
63131-1501

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 22 / 2020

Transaction ID : 83425067

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CROWTHERS, ROY A, , MR,**

Mailing Address 4597 JACKSONBURG RD

City  
TRENTON

State  
OH

Zip Code  
45067-9561

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 01 / 2020

Transaction ID : 83425070

Amount of Each Receipt this Period

30.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

155.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ESTEL, KENNETH, , MR,**

Mailing Address 3401 IVORY RD

City  
METAMORA

State  
MI

Zip Code  
48455-9123

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 10 / 2020

Transaction ID : 83425071

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEGANAH, FRANK A, , MR,**

Mailing Address 20 OCEAN CLUB DR

City  
AMELIA ISLAND

State  
FL

Zip Code  
32034-6543

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 29 / 2020

Transaction ID : 83425075

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAHN, FRED, , MR,**

Mailing Address 1208 COTTONPATCH RD

City  
YORKTOWN

State  
TX

Zip Code  
78164-5060

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
CATTLE RANCHING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 02 / 2020

Transaction ID : 83425077

Amount of Each Receipt this Period

- 1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1040.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAHN, FRED, , MR,**

Mailing Address 1208 COTTONPATCH RD

City  
YORKTOWN

State  
TX

Zip Code  
78164-5060

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
CATTLE RANCHING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 30 / 2020

**Transaction ID : 83425078**

Amount of Each Receipt this Period

6000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PALKIN, FELIX A, , MR,**

Mailing Address 10303 E HIGHWAY 84

City  
AXTELL

State  
TX

Zip Code  
76624-1423

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TEXAS STATE TECHNICAL COLLEGE

Occupation (for Individual)  
LAB ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2020

**Transaction ID : 83425084**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VEGA, ABE, , MR, JR**

Mailing Address 12737 ROSECRANS AVE SPC 6

City  
NORWALK

State  
CA

Zip Code  
90650-4481

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 14 / 2020

**Transaction ID : 83425089**

Amount of Each Receipt this Period

26.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6051.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PORTIER, JAMES, , MR,**

Mailing Address PO BOX 9934

City  
MOBILE

State  
AL

Zip Code  
36691-0934

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 02 / 2020

**Transaction ID : 83425091**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WAGNER, RON, , MR,**

Mailing Address PO BOX 247

City  
BONANZA

State  
OR

Zip Code  
97623-0247

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 04 / 2020

**Transaction ID : 83425092**

Amount of Each Receipt this Period

27.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KIRK, GEORGE, , ,**

Mailing Address 516 OLD BARNSTABLE RD

City  
E FALMOUTH

State  
MA

Zip Code  
02536-5440

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 03 / 2020

**Transaction ID : 83425095**

Amount of Each Receipt this Period

20.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

147.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KRAUS, LAWRENCE W., , MR,

Mailing Address PO BOX 38

City  
RATON

State  
NM

Zip Code  
87740-0038

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

Transaction ID : 83425102

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NUGENT, JAMES C., , MR,

Mailing Address 1020 N SHINE AVE

City  
ORLANDO

State  
FL

Zip Code  
32803-3332

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

Transaction ID : 83425103

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARSHALL, LEE, , ,

Mailing Address 15134 STATE ROUTE 59 W

City  
DRUMMONDS

State  
TN

Zip Code  
38023-6620

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 10 / 2020

Transaction ID : 83425106

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORTON, DANIEL S. , MR,**

Mailing Address 2954 S RICHARDSON DR

City  
MOBILE

State  
AL

Zip Code  
36606-4905

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 10 / 2020

**Transaction ID : 83425119**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COSMO, LARRY, , MR,**

Mailing Address 5207 THE POINTE

City  
ENGLEWOOD

State  
FL

Zip Code  
34223-8108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 15 / 2020

**Transaction ID : 83425122**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NICHOLLS, GILLIAN M. , MS,**

Mailing Address PO BOX 1317

City  
CPE GIRARDEAU

State  
MO

Zip Code  
63702-1317

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 21 / 2020

**Transaction ID : 83425124**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

295.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EHRlich, NANCY M, , MRS,

Mailing Address 4450 RUFFY LN

City  
EL DORADO

State  
CA

Zip Code  
95623-4212

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 14 / 2020

Transaction ID : 83425125

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCGRATH, BRIAN J, , MR,

Mailing Address 101 LINDA LN

City  
SCHENECTADY

State  
NY

Zip Code  
12304-4112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

Transaction ID : 83425130

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, JOSEPH G, , MR,

Mailing Address 124 SUMMIT WALK

City  
PEACHTREE CITY

State  
GA

Zip Code  
30269-3423

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
SELF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 30 / 2020

Transaction ID : 83425131

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

470.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VIAR, RICHARD, , MR,**

Mailing Address PO BOX 123

City  
FINCASTLE

State  
VA

Zip Code  
24090-0123

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 15 / 2020

**Transaction ID : 83425135**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINTERS, ALAN, , MR,**

Mailing Address 13367 OLD WINEMASTER CT

City  
POWAY

State  
CA

Zip Code  
92064-1065

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 07 / 2020

**Transaction ID : 83425140**

Amount of Each Receipt this Period

39.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINTERS, ALAN, , MR,**

Mailing Address 13367 OLD WINEMASTER CT

City  
POWAY

State  
CA

Zip Code  
92064-1065

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

189.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83425141**

Amount of Each Receipt this Period

- 50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

9.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FULLER, DANIEL, , MR,**

Mailing Address 135 AMBER WOODS DR

City  
FORT MILL

State  
SC

Zip Code  
29708-6421

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHENIERE ENERGY

Occupation (for Individual)  
DIRECTOR MARINE OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2020

**Transaction ID : 83425143**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FULLER, DANIEL, , MR,**

Mailing Address 135 AMBER WOODS DR

City  
FORT MILL

State  
SC

Zip Code  
29708-6421

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHENIERE ENERGY

Occupation (for Individual)  
DIRECTOR MARINE OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2020

**Transaction ID : 83425144**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DANIEL, CHARLES W, , MR,**

Mailing Address 3036 CHEROKEE RD

City  
MOUNTAIN BRK

State  
AL

Zip Code  
35223-1312

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
REAL ESTATE INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 14 / 2020

**Transaction ID : 83425145**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

370.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DANIEL, CHARLES W, , MR,**

Mailing Address 3036 CHEROKEE RD

City  
MOUNTAIN BRK

State  
AL

Zip Code  
35223-1312

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
REAL ESTATE INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 29 / 2020

**Transaction ID : 83425146**

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAPINI, DELBERT, , MR,**

Mailing Address 5701 OLIVE RANCH RD

City  
GRANITE BAY

State  
CA

Zip Code  
95746-9415

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DEL RAPINI CONSTRUCTION

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 10 / 2020

**Transaction ID : 83425147**

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, JOSEPH S, , MR,**

Mailing Address 5 TIGER DR

City  
CALIFON

State  
NJ

Zip Code  
07830-3341

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

391.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 28 / 2020

**Transaction ID : 83425152**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARDWELL, JOHN G, , MR,**

Mailing Address 1110 HARVEST WOOD

City  
SAN ANTONIO

State  
TX

Zip Code  
78258-3809

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

**Transaction ID : 83425153**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRADWAY, JOHN W, , MR,**

Mailing Address 102 DUPLIN CT

City  
JACKSONVILLE

State  
NC

Zip Code  
28540-8317

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2020

**Transaction ID : 83425157**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRADWAY, JOHN W, , MR,**

Mailing Address 102 DUPLIN CT

City  
JACKSONVILLE

State  
NC

Zip Code  
28540-8317

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2020

**Transaction ID : 83425158**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ACHORD, LYNNETTE M, , ,**

Mailing Address 1101 HAZELTINE LN NW

City  
KENNESAW

State  
GA

Zip Code  
30152-4742

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 30 / 2020

Transaction ID : 83425171

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, WILLIAM H, , ,**

Mailing Address 1015 STREAMWAY DR

City  
SPRING LAKE

State  
NC

Zip Code  
28390-1967

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US ARMY

Occupation (for Individual)  
PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 28 / 2020

Transaction ID : 83425172

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNSON, WILLIAM H, , ,**

Mailing Address 1015 STREAMWAY DR

City  
SPRING LAKE

State  
NC

Zip Code  
28390-1967

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US ARMY

Occupation (for Individual)  
PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 28 / 2020

Transaction ID : 83425173

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SARVER, RONALD J., MR,**

Mailing Address 13188 WAVERLY AVE

City  
CORONA

State  
CA

Zip Code  
92879-5330

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 25 / 2020

**Transaction ID : 83425178**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EAGLE, FOREST, , MR,**

Mailing Address 533 PRIVATE ROAD 1703

City  
ENTERPRISE

State  
AL

Zip Code  
36330-6377

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DEPT OF THE ARM

Occupation (for Individual)  
TRAINING INSTRUCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 08 / 2020

**Transaction ID : 83425188**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REEDER, KENNETH R., ,**

Mailing Address 775 ADAMS RD

City  
LOVELAND

State  
OH

Zip Code  
45140-7241

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 02 / 2020

**Transaction ID : 83425190**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1275.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEYES, LARRY, , MR,**

Mailing Address PO BOX 1541

City  
HARWICH

State  
MA

Zip Code  
02645-6541

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DELTA AIRLINES

Occupation (for Individual)  
PILOT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 03 / 2020

**Transaction ID : 83425197**

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GARRISON, RANDY, , MR,**

Mailing Address PO BOX 1036

City  
BENTON

State  
TN

Zip Code  
37307-1036

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE COLONELS GARRISON

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 08 / 2020

**Transaction ID : 83425202**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HINTON, WILLIAM, , ,**

Mailing Address 608 CLEARWATER CT

City  
MCDONOUGH

State  
GA

Zip Code  
30252-9031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 30 / 2020

**Transaction ID : 83425209**

Amount of Each Receipt this Period

30.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

86.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PERRINE, NICHOLAS J, , ,

Mailing Address 3612 S 14TH ST APT 303

City  
ALEXANDRIA

State  
VA

Zip Code  
22302-1087

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NATIONAL RIFLE ASSOCIATION

Occupation (for Individual)  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 03 / 2020

Transaction ID : 83425218

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAXEY, ROBERT O, , ,

Mailing Address 113 TREYBOURNE DR

City  
REIDSVILLE

State  
NC

Zip Code  
27320-6849

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2020

Transaction ID : 83425221

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EVANS, WILLIAM D, , MR,

Mailing Address 7722 PALM AIRE LN

City  
SARASOTA

State  
FL

Zip Code  
34243-3729

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 08 / 2020

Transaction ID : 83425222

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

2775.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DOUGLAS, MAX T, , MR, JR

Mailing Address 6615 HOLLY LAKE CT

City  
LOUISVILLEState  
KYZip Code  
40291-3078FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 22 / 2020

Transaction ID : 83425226

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MESSICK, B J, ,

Mailing Address PO BOX 515

City  
DAHLGRENState  
VAZip Code  
22448-0515FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2020

Transaction ID : 83425229

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GWEEN, CHERYL A, , MS,

Mailing Address 1951 OLD FM 306 APT 1402

City  
NEW BRAUNFELSState  
TXZip Code  
78130-3047FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2020

Transaction ID : 83425231

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BLACKMAN, BRUCE, , MR,

Mailing Address 160 OXFORD DR

City  
COTUITState  
MAZip Code  
02635-3059FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 12 / 2020

Transaction ID : 83425235

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SNOW, STEVE, , MR,

Mailing Address 1964 ALLEN AVE

City  
ALTADENAState  
CAZip Code  
91001-3422FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTEDOccupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 18 / 2020

Transaction ID : 83425238

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALPER, RONALD, , MR,

Mailing Address 1805 WILLOW CREEK RANCH RD

City  
IMLAYState  
NVZip Code  
89418-9516FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTEDOccupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 15 / 2020

Transaction ID : 83425248

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

620.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DEGOL, BRUNO A, , MR, JR**

Mailing Address 351 DEGOL DR

City  
TYRONE

State  
PA

Zip Code  
16686-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

**Transaction ID : 83425250**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAWMAN, CLAY, , MR,**

Mailing Address 631 COLE DR

City  
PORT ORANGE

State  
FL

Zip Code  
32127-7753

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2020

**Transaction ID : 83425257**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLAND, JERRY, , MR,**

Mailing Address 111 WILDERNESS DR

City  
KELSO

State  
WA

Zip Code  
98626-9623

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2020

**Transaction ID : 83425267**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BLAND, JERRY, , MR,

Mailing Address 111 WILDERNESS DR

City  
KELSOState  
WAZip Code  
98626-9623FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2020

Transaction ID : 83425268

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROUSE, CHRISTINA, , ,

Mailing Address 359 CIDERMILL PL

City  
LAKE MARYState  
FLZip Code  
32746-6019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

Transaction ID : 83425273

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SACHTLEBEN, RICHARD, , ,

Mailing Address 28389 PANORAMA HILLS DR

City  
MENIFEEState  
CAZip Code  
92584-7406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTEDOccupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 07 / 2020

Transaction ID : 83425287

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

625.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LUO, HONG, , ,

Mailing Address 112 HILL RD

City  
GOSHENState  
NYZip Code  
10924-5044FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEY COASTAL LLCOccupation (for Individual)  
MRG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 01 / 2020

Transaction ID : 83425302

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HANSON, BRENDA, , ,

Mailing Address PO BOX 30022

City  
COLUMBIAState  
MOZip Code  
65205-3022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2020

Transaction ID : 83425309

Amount of Each Receipt this Period

70.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBERTS, JOELLE, , MS,

Mailing Address 2600 S HILL RD LOT 33

City  
GLADSTONEState  
MIZip Code  
49837-2141FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 03 / 2020

Transaction ID : 83425311

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

320.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OAKLEY, RUSSELL, , MR,

Mailing Address 206 AVENUE OF OAKS

City  
ANDERSON

State  
SC

Zip Code  
29621-1822

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 18 / 2020

Transaction ID : 83425314

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CERVANTES, RICARDO, , ,

Mailing Address 5265 RUNNING BEAR DR

City  
SAN JOSE

State  
CA

Zip Code  
95136-3335

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 03 / 2020

Transaction ID : 83425316

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOHLER, MARIA T, , ,

Mailing Address 1037 S LOGAN BLVD

City  
HOLLIDAYSBURG

State  
PA

Zip Code  
16648-2607

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 29 / 2020

Transaction ID : 83425319

Amount of Each Receipt this Period

26.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

76.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHEPHERD, ROBERT, , MR,

Mailing Address 1629 OLD XENIA RD SW

City  
LONDONState  
OHZip Code  
43140-9250FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464806

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRONBERG, THOMAS, , MR,

Mailing Address 66596 WAYMIRE RD

City  
NORTH BENDState  
ORZip Code  
97459-7565FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464807

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HIGA, JACK, , MR,

Mailing Address 913 8TH AVE

City  
HONOLULUState  
HIZip Code  
96816-7125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464808

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADKINS, GLENN, , ,**

Mailing Address 7219 NICKABURR CREEK DR

City  
MAGNOLIA

State  
TX

Zip Code  
77354-5976

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464809**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAYNARD, KAY, , ,**

Mailing Address 405 WILDLIFE DR

City  
SOMERSET

State  
KY

Zip Code  
42503-6254

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464810**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HASENFRATZ, JAMES, , MR,**

Mailing Address 3081 COUNTY ROAD 14

City  
WOODVILLE

State  
OH

Zip Code  
43469-9760

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464811**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, JERRY, , MR,

Mailing Address 644 S MAIN ST

City  
GEORGETOWNState  
ILZip Code  
61846-1933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464812

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DOWNING, CARL, , MR, JR

Mailing Address 2801 S MCKINLEY ST

City  
CASPERState  
WYZip Code  
82601-5737FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464813

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DOUGLASS, OLIVER, , MR,

Mailing Address 5108 CEDAR LAWN WAY

City  
LAS VEGASState  
NVZip Code  
89130-3659FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464814

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HART, ROBERT, , MR,

Mailing Address 1001 HIGHLAND ST

City  
BRADDOKState  
PAZip Code  
15104-2120FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464815

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LORENZEN, ROGER, , ,

Mailing Address 2303 COUNTY ROAD D25

City  
HORNICKState  
IAZip Code  
51026-8132FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464816

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ESPER, TOM, , MR,

Mailing Address 3507 KNIGHT RD NE

City  
WASHINGTON COURT HOUSEState  
OHZip Code  
43160-9328FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

347.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464817

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KING, ROBERT, , MR,**

Mailing Address 310 MARSH AVE

City  
RALEIGH

State  
NC

Zip Code  
27606-1343

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464818**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PURFIELD, JOSEPH, , MR,**

Mailing Address 5 GARDEN CIR

City  
WEST CHESTER

State  
PA

Zip Code  
19382-7315

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464819**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARTWRIGHT, ROBERT, , MR,**

Mailing Address 811 BASHAM DR

City  
CHARLESTOWN

State  
IN

Zip Code  
47111-1907

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464820**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETTITT, JOHN, , MR,**

Mailing Address PO BOX 547

City  
CORVALLIS

State  
MT

Zip Code  
59828-0547

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464821

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBERTS, BILL, , MR,**

Mailing Address 507 NORTHGATE TRL

City  
GREENVILLE

State  
TX

Zip Code  
75402-3220

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464822

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABBITT, CHARLES, , MR,**

Mailing Address 527 PARK LN

City  
RICHARDSON

State  
TX

Zip Code  
75081-4275

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464823

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAMRON, JOHN, , MR,

Mailing Address 15 ESTATES RD

City  
ALLENState  
TXZip Code  
75002-7625FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464824

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BILLINGS, STEVE, , MR,

Mailing Address 18 OLD AIRPORT RD NW

City  
ROMEState  
GAZip Code  
30165-2002FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464825

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BROWN, M, , MR,

Mailing Address 31632B BETHEL CHURCH RD

City  
PAOLAState  
KSZip Code  
66071-5803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464826

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLANK, GARY, , MR,**

Mailing Address 1755 RAKE AVE

City  
GARNER

State  
IA

Zip Code  
50438-8654

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464827**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MALCOLM, REBECCA, , MS,**

Mailing Address PO BOX 480797

City  
KANSAS CITY

State  
MO

Zip Code  
64148-0797

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464828**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRITTEN, WILLIAM, , MR,**

Mailing Address 9616 DENEEN DR

City  
NOBLESVILLE

State  
IN

Zip Code  
46060-1531

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464829**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURTIS, LAWRENCE, , ,**

Mailing Address 4160 STATE ROUTE 40

City  
ARGYLE

State  
NY

Zip Code  
12809-3481

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464830**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STONE, KENNETH, , MR,**

Mailing Address 6 BUD FIELD DR

City

PALM COAST

State

FL

Zip Code

32137-9477

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464831**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUTTON, JAMES, , MR,**

Mailing Address 3906 SARAH DR

City

WESLEY CHAPEL

State

FL

Zip Code

33543-5070

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464832**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEELY, JAMES, , MR,**

Mailing Address 1626 S WILLOW CT

City  
DENVER

State  
CO

Zip Code  
80231-2929

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464833**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JENSEN, CHARLES, , MR,**

Mailing Address PO BOX 604

City  
SAINT JOHNS

State  
AZ

Zip Code  
85936-0604

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464834**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GAYLOR, JOHN, , MR,**

Mailing Address 62089 LAKE ST

City  
CASSOPOLIS

State  
MI

Zip Code  
49031-9322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464835**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RIGGS, BROWNING, , MR,

Mailing Address 103 LAPINE DR

City  
ABBEVILLEState  
ALZip Code  
36310-2717FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464836

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALBRITTON, STARKE, , MR,

Mailing Address PO BOX 233

City  
CAMDENState  
ALZip Code  
36726-0233FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464837

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GETZ, SAMUEL, , MR,

Mailing Address 9453 FERGUSON VALLEY RD

City  
LEWISTOWNState  
PAZip Code  
17044-8629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464838

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, DELBERT, , MR, JR**

Mailing Address 440 NW 96TH ST

City  
OKLAHOMA CITY

State  
OK

Zip Code  
73114-6139

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464839**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANNING, KENNETH, , MR,**

Mailing Address 725 HELMS WAY

City  
CONWAY

State  
SC

Zip Code  
29526-9060

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464840**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSULLIVAN, JOHN, , MR,**

Mailing Address 175 CONKLIN ST

City  
SOUTH PLAINFIELD

State  
NJ

Zip Code  
07080-3628

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464841**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CURRAN, THOMAS, , MR, JR

Mailing Address 3907 CLANCY CT

City  
BAKERSFIELDState  
CAZip Code  
93311-1478FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464842

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BURNSIDE, THOMAS, , MR,

Mailing Address GENERAL DELIVERY

City  
KANSASState  
ILZip Code  
61933-9999FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464843

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALANIS, DANIEL, , MR, III

Mailing Address 1678 GOAT HILL RD

City  
LAKEHILLSState  
TXZip Code  
78063-6856FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464844

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VIRTIS, CHARLES, , MR,

Mailing Address 5812 STATE ROUTE 54

City  
MECHANICSBURG

State  
OH

Zip Code  
43044-9753

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464845

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LITZINGER, JOHN, , MR,

Mailing Address 5410 BARBADOS SQ

City  
VERO BEACH

State  
FL

Zip Code  
32967-7676

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464846

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GARNER, LANE, , ,

Mailing Address 3415 CANTON ST

City  
GREENVILLE

State  
TX

Zip Code  
75402-6211

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
UNEMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464847

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAMBERT, LARRY, , MR,**

Mailing Address 1803 EUSTIS ST

City  
LAUDERDALE

State  
MN

Zip Code  
55113-5219

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MINVALCO

Occupation (for Individual)  
CITY DESK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464848**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CEJA, ROBERT, , MR,**

Mailing Address 2450 LEWIS ST

City  
BLUE ISLAND

State  
IL

Zip Code  
60406-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALMART

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464849**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEBHARDT, MARK, , MR,**

Mailing Address PO BOX 340

City  
CEDAR SPRINGS

State  
MI

Zip Code  
49319-0340

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GEBHARDT INSURANCE AGENCY

Occupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464850**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ELLIOTT, GENE, , MR,**

Mailing Address 9 WILLIS CT

City

WASHINGTON COURT HOU

State

OH

Zip Code

43160-1073

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464851**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PFISTERER, DIETER, , MR,**

Mailing Address 757 MCCOY RD

City

FRANKLIN LAKES

State

NJ

Zip Code

07417-1228

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

PFISTER MAINTENANCE

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464852**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, KYLE, , MR,**

Mailing Address 8801 TARTER AVE APT 609

City

AMARILLO

State

TX

Zip Code

79119-6360

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

TEXAS DEPARTMENT OF AGRICULTURE

Occupation (for Individual)

INVESTIGATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464853**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BYLER, TIMOTHY, , MR,**

Mailing Address 7495 S COUNTY ROAD 6 E

City  
MONTE VISTA

State  
CO

Zip Code  
81144-9634

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF TIMWIN HOMES

Occupation (for Individual)  
CARPENTRY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464854**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUSNACK, CHARLES, , MR,**

Mailing Address 1004 CALIFON COKEBURY RD

City  
LEBANON

State  
NJ

Zip Code  
08833-4541

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464855**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRECK, ALAN, , MR,**

Mailing Address 15510 BIRWOOD AVE

City  
BEVERLY HILLS

State  
MI

Zip Code  
48025-3328

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464856**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MERCIER, TERENCE, , MR,

Mailing Address 2906 25TH AVE

City  
KENOSHAState  
WIZip Code  
53140-2057FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464857

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCARBOROUGH, R, , MR,

Mailing Address 125 BURNEY RD

City  
BRUNSWICKState  
GAZip Code  
31523-6008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464858

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLLINS, RONALD, , MR,

Mailing Address 2402 MOUND AVE

City  
PANAMA CITYState  
FLZip Code  
32405-1339FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464859

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LATKA, THOMAS, , MR,

Mailing Address 46112 GREEN VALLEY CT

City  
PLYMOUTHState  
MIZip Code  
48170-3526FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 31 2020

Transaction ID : 83464860

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETTY, SCOTT, , MR,

Mailing Address PO BOX 1165

City  
SARATOGAState  
WYZip Code  
82331-1165FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 31 2020

Transaction ID : 83464861

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RADER, SAMUEL, , MR,

Mailing Address 26 HERON CT

City  
BAILEYState  
COZip Code  
80421-2406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 31 2020

Transaction ID : 83464862

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLE, HERBERT, , MR,**

Mailing Address 4584 COLE LN

City  
PETERSBURG

State  
PA

Zip Code  
16669-2025

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464863**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARTER, TOM, , MR,**

Mailing Address PO BOX 93

City  
DE SOTO

State  
IL

Zip Code  
62924-0093

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464864**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAMMANS, BILLY, , ,**

Mailing Address 711 E TANYA TRL

City  
PHOENIX

State  
AZ

Zip Code  
85086-0706

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464865**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARBISON, KENT, , MR,

Mailing Address 1940 CLARK RUN RD

City  
XENIAState  
OHZip Code  
45385-9447FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464866

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KLEBERG, RICHARD, M, MR, III

Mailing Address PO BOX 17777

City

SAN ANTONIO

State

TX

Zip Code

78217-0777

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464867

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCDARIS, MICHAEL, , MR,

Mailing Address 11631 MOONLIGHT MEADOW DR

City

CIBOLO

State

TX

Zip Code

78108-3879

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464868

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALVORSON, NORMAN, , MR,

Mailing Address 39513 285TH ST SE

City  
GULLYState  
MNZip Code  
56646-4003FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464869

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KNUCKLES, CARTER, , MR,

Mailing Address 9710 HIGHWAY J

City

BOURBON

State  
MOZip Code  
65441-9612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464870

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WELCH, LESTER, , MR,

Mailing Address 308 HAVERHILL ST

City

NORTH READING

State  
MAZip Code  
01864-1448FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464871

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DURRANCE, J, D, MR,**

Mailing Address PO BOX 2414

City  
BARTOW

State  
FL

Zip Code  
33831-2414

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464872**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POPOV, JOHN, , MR, JR**

Mailing Address 612 TILLOTSON ST

City  
COLLINSVILLE

State  
IL

Zip Code  
62234-3640

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464873**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KORF, CLIFFORD, , MR,**

Mailing Address 1325 BOBWHITE CIR

City  
FIRTH

State  
NE

Zip Code  
68358-7577

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464874**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILKINSON, SHERMAN, , MR,**

Mailing Address 119 1ST ST

City  
PALATKA

State  
FL

Zip Code  
32177-8954

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464875**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUTKA, MARK, J, MR,**

Mailing Address 1020 JAMAICA ST

City  
AURORA

State  
CO

Zip Code  
80010-4031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464876**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUTLER, DAVID, , MR,**

Mailing Address 617 RICH ST

City  
SLATER

State  
MO

Zip Code  
65349-1253

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464877**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TAYLOR, LARRY, , MR,

Mailing Address 705 SW 24TH ST

City  
JOSHUAState  
TXZip Code  
76058-3377FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464878

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, STEVEN, , MR,

Mailing Address 6155 FLORES RD

City  
ATASCADEROState  
CAZip Code  
93422-3610FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464879

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLLECCHI, TODD, , MR,

Mailing Address PO BOX 363

City  
SOUTH PRAIRIEState  
WAZip Code  
98385-0363FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464880

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHARP, NORMAN, , MR,**

Mailing Address 154 RED WELL RD

City  
NEW HOLLAND

State  
PA

Zip Code  
17557-9515

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464881**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LONG, JOHN, , ,**

Mailing Address 9820 ATWOOD DR

City  
SOUTH LYON

State  
MI

Zip Code  
48178-9111

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464882**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERRELL, TERESA, , MRS,**

Mailing Address 5088 SHOESTRING TRL

City  
CRAWLEY

State  
WV

Zip Code  
24931

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464883**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NIEMCZYK, MICHAEL, , MR,

Mailing Address 1502 MAHOGANY RUN DR

City  
LA GRANGE

State  
KY

Zip Code  
40031-8936

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464884

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FORSTER, DAVID, , MR,

Mailing Address PO BOX 330

City  
COLUSA

State  
CA

Zip Code  
95932-0330

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464885

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOJCIECHOWSKI, ROBERT, , ,

Mailing Address 862 RIVER RIDGE CIR

City  
WATERFORD

State  
WI

Zip Code  
53185-3391

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464886

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 OF 239

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POOLE, JIM, , ,**

Mailing Address PO BOX 497

City  
UVALDAState  
GAZip Code  
30473-0497FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

**Transaction ID : 83464887**

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RICE, MARY, , ,**

Mailing Address 556 E LOULA ST

City  
OLATHEState  
KSZip Code  
66061-5402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GERSON COMPANYOccupation (for Individual)  
RECEPTIONIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

**Transaction ID : 83464888**

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HASPELS, GERRIT, , ,**

Mailing Address 2928 STARLING AVE

City  
SANBORNState  
IAZip Code  
51248-7436FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARCHER COOP GRAINOccupation (for Individual)  
GRAIN HANDLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

**Transaction ID : 83464889**

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUELLER, ROBERT, , MR,**

Mailing Address 11616 W GREENFIELD AVE APT 25

City  
WEST ALLIS

State  
WI

Zip Code  
53214-2153

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BAKER'S QUALITY PIZZA CRESTS

Occupation (for Individual)  
CLEANER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464890**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRANK, CHRIS, , MR,**

Mailing Address 303 MONTANA AVE

City  
SOUTH MILWAUKEE

State  
WI

Zip Code  
53172-2846

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MARED MECHANICAL CONTRACTORS

Occupation (for Individual)  
SHEET METAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464891**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAWTON, LARRY, , MR,**

Mailing Address 4062 SHORECREST DR

City  
ORLANDO

State  
FL

Zip Code  
32804-2225

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LAWTON BROS. INC.

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464892**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SAUER, FRED, , ,

Mailing Address 454 HAMMERSMITH RD

City  
SAINT LOUIS

State  
MO

Zip Code  
63141-8628

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ORION INVESTMENT CO

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464893

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FUSSELL, LONNIE, , MR,

Mailing Address 1710 FREDERICKSBURG RD

City  
SAN ANTONIO

State  
TX

Zip Code  
78201-5033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
OPTICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464894

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VOYLES, STEPHEN, , ,

Mailing Address PO BOX 544

City  
FENTON

State  
MO

Zip Code  
63026-0544

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464895

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, RONALD, , MR,

Mailing Address 357 W STATE ST

City  
WAVERLYState  
ILZip Code  
62692-1061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WHALEN TRUCKINGOccupation (for Individual)  
DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464896

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NARCONIS, THOMAS, , MR,

Mailing Address 2890 S MEDINA LINE RD

City  
WADSWORTHState  
OHZip Code  
44281-8423FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTERRA CO-OPOccupation (for Individual)  
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464897

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PEARSON, DANIEL, , MR, III

Mailing Address 1940 MAYFLOWER DR

City  
DALLASState  
TXZip Code  
75208-3113FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
MUSIC TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464898

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOLLY, JAMES, , MR, JR

Mailing Address PO BOX 826

City  
ANDERSON

State  
SC

Zip Code  
29622-0826

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOGAN & JOLLY, LLC

Occupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464899

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HORNER, ROBERT, , MR,

Mailing Address 13318 FARM ROAD 2195

City  
CASSVILLE

State  
MO

Zip Code  
65625-7485

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REQUESTED INFO

Occupation (for Individual)  
REQUESTED INFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464900

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUNDY, CURTIS, , ,

Mailing Address 14750 OLD PASCAGOULA RD

City  
GRAND BAY

State  
AL

Zip Code  
36541-4071

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464901

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WATSON, LARRY, , MR,

Mailing Address HO 74 2B3

100943 LONG CANYON TRL

City

INYOKERN

State

CA

Zip Code

93527-3256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464902

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARTIN, PHIL, , MR,

Mailing Address 10370 HUNTSMAN RD

City

COLORADO SPRINGS

State

CO

Zip Code

80908-4236

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464903

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CATCHPOLE, LAWRENCE, , ,

Mailing Address 3911 DILL DR

City

WATERFORD

State

MI

Zip Code

48329-2137

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464904

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WARWICK, STEVEN, , MR,

Mailing Address 2744 VAN CLIBURN CIR

City  
MIDDLETOWN

State  
DE

Zip Code  
19709-3201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464905

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WELEGALA, CHARLES, , MR,

Mailing Address 17631 LISA VALLEY CT

City  
WILDWOOD

State  
MO

Zip Code  
63005-4267

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464906

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORGAN, KENNETH, , MR,

Mailing Address 2617 E KINGS AVE

City  
PHOENIX

State  
AZ

Zip Code  
85032-2927

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464907

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAUER, ANNA, , ,**

Mailing Address 1013 BEECH ST

City  
EAST LANSING

State  
MI

Zip Code  
48823-3505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464908**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHURCH, GARY, , MR,**

Mailing Address 2023 BLACKS RD SW

City  
HEBRON

State  
OH

Zip Code  
43025-9776

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464909**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALTMAN, JAMES, , MR,**

Mailing Address 137 HARRIET AVE

City  
TRIADELPHIA

State  
WV

Zip Code  
26059-1415

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464910**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 92 OF 239

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MYHRLAND, NORMAN, , MR,**

Mailing Address 3 SINGLELEAF PL

City  
DERRY

State  
NH

Zip Code  
03038-7360

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464911**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ECKRICH, GEOFFREY, , MR,**

Mailing Address 1601 S AIRPORT DR LOT 374

City

WESLACO

State

TX

Zip Code

78596-4566

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464912**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINCH, ROGER, , MR,**

Mailing Address 2611 SAN LUIS ST

City

LAS VEGAS

State

NV

Zip Code

89115-4235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464913**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOORE, JAMES, , ,**

Mailing Address 807 BETTY ST

City  
SPRINGDALE

State  
AR

Zip Code  
72762-3862

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALMART

Occupation (for Individual)  
STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464914**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, DOUGLAS, , MR,**

Mailing Address 1548 WOODLAND LAKE RD

City  
WARREN CENTER

State  
PA

Zip Code  
18851-7907

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DICK'S SPORTING GOODS DC

Occupation (for Individual)  
MAINTENANCE TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464915**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ETHERTON, VICKI, , ,**

Mailing Address 6282 N 31ST ST

City  
PHOENIX

State  
AZ

Zip Code  
85016-2354

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LANDMARK TITLE ASSURANCE AGENCY

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464916**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACKSON, GEORGE, , MR,**

Mailing Address 4155 PITTMAN RD

City  
ATLANTA

State  
GA

Zip Code  
30349-1440

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TCI OF ALABAMA, LLC

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464917**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEDWON, RONALD, , MR,**

Mailing Address 3565 SANDY CREEK DR

City

SHELBY TOWNSHIP

State

MI

Zip Code

48316-3959

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PRAIRIE FARM DAIRY COMPANY

Occupation (for Individual)  
DRIVER SALESMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464918**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STOCKER, ALAN, , MR,**

Mailing Address 3140 DURWOOD DR

City

FLORISSANT

State

MO

Zip Code

63033-6212

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AUTOMOBILE CLUB OF MISSOURI

Occupation (for Individual)  
DISPATCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464919**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STUTSMAN, CARLO, , MR,**

Mailing Address 3660 ROBINSON CREEK RD

City  
UKIAH

State  
CA

Zip Code  
95482-8900

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
GENERAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464920**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GONZLES, LUIS, , MR,**

Mailing Address 871 ROAD 4990

City

BLOOMFIELD

State

NM

Zip Code

87413-9623

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CNJ OILFIELD SERVICE

Occupation (for Individual)  
MECHANIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464921**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BACAK, JOSEPH, , MR,**

Mailing Address 1745 OVERLAND AVE NE

City

WARREN

State

OH

Zip Code

44483-2860

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AJAX TACCO MAGNETHERMIC

Occupation (for Individual)  
PRODUCT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464922**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, JAMES, , MR,**

Mailing Address 1059 GALLEN CT

City  
MOBILE

State  
AL

Zip Code  
36608-3617

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464923**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCDONALD, CHARLES, , MR,**

Mailing Address PO BOX 14513

City

HUNTSVILLE

State

AL

Zip Code

35815-0513

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SECURITY ENGINEERS, INC

Occupation (for Individual)  
SECURITY OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464924**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CHRISLEY, LATHAN, , ,**

Mailing Address 8701 SUMMER CREEK RD

City

BAKERSFIELD

State

CA

Zip Code

93311-2537

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464925**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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250.00



# SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HEYNE, ELLA, , ,

Mailing Address 702 GULF ST

City  
LAKE CHARLESState  
LAZip Code  
70601-8636FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 15 / 2020

Transaction ID : 83464927

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HURFORD, DANA, , ,

Mailing Address 5430 HEUMANN DR

City  
LINCOLNState  
NEZip Code  
68504-3317FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 08 / 2020

Transaction ID : 83464929

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCKELLAR, COLEY, , ,

Mailing Address 41848 445TH ST SE

City  
LENGBYState  
MNZip Code  
56651-4026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 03 / 2020

Transaction ID : 83464931

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1050.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POSLEY, NATHAN, , ,**

Mailing Address 5694 ASHBROOK DR

City  
TOLEDO

State  
OH

Zip Code  
43614-1110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2020

**Transaction ID : 83464933**

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PROKES, SCOTT, , ,**

Mailing Address 8522 SANTALIA AVE

City  
JACKSONVILLE

State  
FL

Zip Code  
32211-6348

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 29 / 2020

**Transaction ID : 83464935**

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPRATT, PHOENIX, , ,**

Mailing Address 2108 CATLETT DR

City  
SALEM

State  
VA

Zip Code  
24153-5647

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 25 / 2020

**Transaction ID : 83464937**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STOYER, PETER, , ,

Mailing Address 118 KECK LN

City  
RUFFS DALE

State  
PA

Zip Code  
15679-1224

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2020

Transaction ID : 83464939

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TAGACA, SARA, , ,

Mailing Address 1 POPLAR ST

City  
WINSLOW

State  
ME

Zip Code  
04901-7205

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2020

Transaction ID : 83464941

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YERIGAN, JON, , ,

Mailing Address 272 4TH ST

City  
SAINT JAMES

State  
NY

Zip Code  
11780-2429

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2020

Transaction ID : 83464943

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

800.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHEPHERD, ROBERT, , MR,**

Mailing Address 1629 OLD XENIA RD SW

City  
LONDON

State  
OH

Zip Code  
43140-9250

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464945**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KRONBERG, THOMAS, , MR,**

Mailing Address 66596 WAYMIRE RD

City  
NORTH BEND

State  
OR

Zip Code  
97459-7565

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464946**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HIGA, JACK, , MR,**

Mailing Address 913 8TH AVE

City  
HONOLULU

State  
HI

Zip Code  
96816-7125

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464947**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADKINS, GLENN, , ,**

Mailing Address 7219 NICKABURR CREEK DR

City  
MAGNOLIA

State  
TX

Zip Code  
77354-5976

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464948**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAYNARD, KAY, , ,**

Mailing Address 405 WILDLIFE DR

City  
SOMERSET

State  
KY

Zip Code  
42503-6254

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464949**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HASENFRATZ, JAMES, , MR,**

Mailing Address 3081 COUNTY ROAD 14

City  
WOODVILLE

State  
OH

Zip Code  
43469-9760

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464950**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, JERRY, , MR,**

Mailing Address 644 S MAIN ST

City  
GEORGETOWN

State  
IL

Zip Code  
61846-1933

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464951**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOWNING, CARL, , MR, JR**

Mailing Address 2801 S MCKINLEY ST

City  
CASPER

State  
WY

Zip Code  
82601-5737

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464952**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOUGLASS, OLIVER, , MR,**

Mailing Address 5108 CEDAR LAWN WAY

City  
LAS VEGAS

State  
NV

Zip Code  
89130-3659

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464953**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HART, ROBERT, , MR,**

Mailing Address 1001 HIGHLAND ST

City  
BRADDOCK

State  
PA

Zip Code  
15104-2120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464954**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LORENZEN, ROGER, , ,**

Mailing Address 2303 COUNTY ROAD D25

City  
HORNICK

State  
IA

Zip Code  
51026-8132

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464955**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ESPER, TOM, , MR,**

Mailing Address 3507 KNIGHT RD NE

City  
WASHINGTON COURT HOUSE

State  
OH

Zip Code  
43160-9328

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

347.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464956**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KING, ROBERT, , MR,**

Mailing Address 310 MARSH AVE

City  
RALEIGH

State  
NC

Zip Code  
27606-1343

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464957**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PURFIELD, JOSEPH, , MR,**

Mailing Address 5 GARDEN CIR

City  
WEST CHESTER

State  
PA

Zip Code  
19382-7315

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464958**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARTWRIGHT, ROBERT, , MR,**

Mailing Address 811 BASHAM DR

City  
CHARLESTOWN

State  
IN

Zip Code  
47111-1907

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464959**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETTITT, JOHN, , MR,**

Mailing Address PO BOX 547

City  
CORVALLIS

State  
MT

Zip Code  
59828-0547

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464960**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBERTS, BILL, , MR,**

Mailing Address 507 NORTHGATE TRL

City  
GREENVILLE

State  
TX

Zip Code  
75402-3220

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464961**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ABBITT, CHARLES, , MR,**

Mailing Address 527 PARK LN

City  
RICHARDSON

State  
TX

Zip Code  
75081-4275

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464962**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAMRON, JOHN, , MR,**

Mailing Address 15 ESTATES RD

City  
ALLEN

State  
TX

Zip Code  
75002-7625

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464963**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BILLINGS, STEVE, , MR,**

Mailing Address 18 OLD AIRPORT RD NW

City  
ROME

State  
GA

Zip Code  
30165-2002

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464964**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, M, , MR,**

Mailing Address 31632B BETHEL CHURCH RD

City  
PAOLA

State  
KS

Zip Code  
66071-5803

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464965**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BLANK, GARY, , MR,

Mailing Address 1755 RAKE AVE

City  
GARNERState  
IAZip Code  
50438-8654FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464966

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MALCOLM, REBECCA, , MS,

Mailing Address PO BOX 480797

City  
KANSAS CITYState  
MOZip Code  
64148-0797FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464967

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRITTEN, WILLIAM, , MR,

Mailing Address 9616 DENEEN DR

City  
NOBLESVILLEState  
INZip Code  
46060-1531FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83464968

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

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TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURTIS, LAWRENCE, , ,**

Mailing Address 4160 STATE ROUTE 40

City  
ARGYLE

State  
NY

Zip Code  
12809-3481

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464969**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STONE, KENNETH, , MR,**

Mailing Address 6 BUD FIELD DR

City

PALM COAST

State

FL

Zip Code

32137-9477

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464970**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUTTON, JAMES, , MR,**

Mailing Address 3906 SARAH DR

City

WESLEY CHAPEL

State

FL

Zip Code

33543-5070

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464971**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEELY, JAMES, , MR,**

Mailing Address 1626 S WILLOW CT

City  
DENVER

State  
CO

Zip Code  
80231-2929

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464972

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JENSEN, CHARLES, , MR,**

Mailing Address PO BOX 604

City  
SAINT JOHNS

State  
AZ

Zip Code  
85936-0604

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464973

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GAYLOR, JOHN, , MR,**

Mailing Address 62089 LAKE ST

City  
CASSOPOLIS

State  
MI

Zip Code  
49031-9322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464974

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIGGS, BROWNING, , MR,**

Mailing Address 103 LAPINE DR

City  
ABBEVILLE

State  
AL

Zip Code  
36310-2717

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464975**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALBRITTON, STARKE, , MR,**

Mailing Address PO BOX 233

City  
CAMDEN

State  
AL

Zip Code  
36726-0233

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464976**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GETZ, SAMUEL, , MR,**

Mailing Address 9453 FERGUSON VALLEY RD

City  
LEWISTOWN

State  
PA

Zip Code  
17044-8629

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464977**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, DELBERT, , MR, JR**

Mailing Address 440 NW 96TH ST

City  
OKLAHOMA CITY

State  
OK

Zip Code  
73114-6139

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464978**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MANNING, KENNETH, , MR,**

Mailing Address 725 HELMS WAY

City  
CONWAY

State  
SC

Zip Code  
29526-9060

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464979**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OSULLIVAN, JOHN, , MR,**

Mailing Address 175 CONKLIN ST

City  
SOUTH PLAINFIELD

State  
NJ

Zip Code  
07080-3628

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464980**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CURRAN, THOMAS, , MR, JR**

Mailing Address 3907 CLANCY CT

City  
BAKERSFIELD

State  
CA

Zip Code  
93311-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464981

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BURNSIDE, THOMAS, , MR,**

Mailing Address GENERAL DELIVERY

City  
KANSAS

State  
IL

Zip Code  
61933-9999

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464982

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALANIS, DANIEL, , MR, III**

Mailing Address 1678 GOAT HILL RD

City  
LAKEHILLS

State  
TX

Zip Code  
78063-6856

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464983

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VIRTIS, CHARLES, , MR,

Mailing Address 5812 STATE ROUTE 54

City  
MECHANICSBURG

State  
OH

Zip Code  
43044-9753

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464984

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LITZINGER, JOHN, , MR,

Mailing Address 5410 BARBADOS SQ

City  
VERO BEACH

State  
FL

Zip Code  
32967-7676

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464985

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GARNER, LANE, , ,

Mailing Address 3415 CANTON ST

City  
GREENVILLE

State  
TX

Zip Code  
75402-6211

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
UNEMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464986

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAMBERT, LARRY, , MR,**

Mailing Address 1803 EUSTIS ST

City  
LAUDERDALE

State  
MN

Zip Code  
55113-5219

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MINVALCO

Occupation (for Individual)  
CITY DESK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464987**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CEJA, ROBERT, , MR,**

Mailing Address 2450 LEWIS ST

City  
BLUE ISLAND

State  
IL

Zip Code  
60406-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALMART

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464988**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GEBHARDT, MARK, , MR,**

Mailing Address PO BOX 340

City  
CEDAR SPRINGS

State  
MI

Zip Code  
49319-0340

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GEBHARDT INSURANCE AGENCY

Occupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464989**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELLIOTT, GENE, , MR,

Mailing Address 9 WILLIS CT

City  
WASHINGTON COURT HOUState  
OHZip Code  
43160-1073FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464990

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PFISTERER, DIETER, , MR,

Mailing Address 757 MCCOY RD

City  
FRANKLIN LAKESState  
NJZip Code  
07417-1228FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PFISTER MAINTENANCEOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464991

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMPSON, KYLE, , MR,

Mailing Address 8801 TARTER AVE APT 609

City  
AMARILLOState  
TXZip Code  
79119-6360FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TEXAS DEPARTMENT OF AGRICULTUREOccupation (for Individual)  
INVESTIGATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464992

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BYLER, TIMOTHY, , MR,**

Mailing Address 7495 S COUNTY ROAD 6 E

City  
MONTE VISTA

State  
CO

Zip Code  
81144-9634

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF TIMWIN HOMES

Occupation (for Individual)  
CARPENTRY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464993**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUSNACK, CHARLES, , MR,**

Mailing Address 1004 CALIFON COKEBURY RD

City  
LEBANON

State  
NJ

Zip Code  
08833-4541

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464994**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRECK, ALAN, , MR,**

Mailing Address 15510 BIRWOOD AVE

City  
BEVERLY HILLS

State  
MI

Zip Code  
48025-3328

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83464995**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MERCIER, TERRENCE, , MR,**

Mailing Address 2906 25TH AVE

City  
KENOSHA

State  
WI

Zip Code  
53140-2057

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464996

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCARBOROUGH, R, , MR,**

Mailing Address 125 BURNEY RD

City  
BRUNSWICK

State  
GA

Zip Code  
31523-6008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464997

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLINS, RONALD, , MR,**

Mailing Address 2402 MOUND AVE

City  
PANAMA CITY

State  
FL

Zip Code  
32405-1339

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464998

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LATKA, THOMAS, , MR,

Mailing Address 46112 GREEN VALLEY CT

City  
PLYMOUTHState  
MIZip Code  
48170-3526FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83464999

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETTY, SCOTT, , MR,

Mailing Address PO BOX 1165

City  
SARATOGAState  
WYZip Code  
82331-1165FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465000

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RADER, SAMUEL, , MR,

Mailing Address 26 HERON CT

City  
BAILEYState  
COZip Code  
80421-2406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465001

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLE, HERBERT, , MR,**

Mailing Address 4584 COLE LN

City  
PETERSBURG

State  
PA

Zip Code  
16669-2025

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465002**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARTER, TOM, , MR,**

Mailing Address PO BOX 93

City  
DE SOTO

State  
IL

Zip Code  
62924-0093

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465003**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAMMANS, BILLY, , ,**

Mailing Address 711 E TANYA TRL

City  
PHOENIX

State  
AZ

Zip Code  
85086-0706

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465004**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARBISON, KENT, , MR,**

Mailing Address 1940 CLARK RUN RD

City  
XENIA

State  
OH

Zip Code  
45385-9447

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465005**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KLEBERG, RICHARD, M, MR, III**

Mailing Address PO BOX 17777

City

SAN ANTONIO

State

TX

Zip Code

78217-0777

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465006**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCDARIS, MICHAEL, , MR,**

Mailing Address 11631 MOONLIGHT MEADOW DR

City

CIBOLO

State

TX

Zip Code

78108-3879

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465007**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HALVORSON, NORMAN, , MR,**

Mailing Address 39513 285TH ST SE

City  
GULLY

State  
MN

Zip Code  
56646-4003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465008**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KNUCKLES, CARTER, , MR,**

Mailing Address 9710 HIGHWAY J

City

BOURBON

State

MO

Zip Code

65441-9612

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465009**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WELCH, LESTER, , MR,**

Mailing Address 308 HAVERHILL ST

City

NORTH READING

State

MA

Zip Code

01864-1448

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465010**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DURRANCE, J, D, MR,**

Mailing Address PO BOX 2414

City  
BARTOW

State  
FL

Zip Code  
33831-2414

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465011**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POPOV, JOHN, , MR, JR**

Mailing Address 612 TILLOTSON ST

City  
COLLINSVILLE

State  
IL

Zip Code  
62234-3640

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465012**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KORF, CLIFFORD, , MR,**

Mailing Address 1325 BOBWHITE CIR

City  
FIRTH

State  
NE

Zip Code  
68358-7577

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465013**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILKINSON, SHERMAN, , MR,**

Mailing Address 119 1ST ST

City  
PALATKA

State  
FL

Zip Code  
32177-8954

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465014**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUTKA, MARK, J, MR,**

Mailing Address 1020 JAMAICA ST

City  
AURORA

State  
CO

Zip Code  
80010-4031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465015**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUTLER, DAVID, , MR,**

Mailing Address 617 RICH ST

City  
SLATER

State  
MO

Zip Code  
65349-1253

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465016**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, LARRY, , MR,**

Mailing Address 705 SW 24TH ST

City  
JOSHUA

State  
TX

Zip Code  
76058-3377

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465017**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JOHNSON, STEVEN, , MR,**

Mailing Address 6155 FLORES RD

City

ATASCADERO

State  
CA

Zip Code  
93422-3610

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465018**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLLECCHI, TODD, , MR,**

Mailing Address PO BOX 363

City

SOUTH PRAIRIE

State  
WA

Zip Code  
98385-0363

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465019**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHARP, NORMAN, , MR,**

Mailing Address 154 RED WELL RD

City  
NEW HOLLAND

State  
PA

Zip Code  
17557-9515

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465020**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LONG, JOHN, , ,**

Mailing Address 9820 ATWOOD DR

City  
SOUTH LYON

State  
MI

Zip Code  
48178-9111

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465021**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERRELL, TERESA, , MRS,**

Mailing Address 5088 SHOESTRING TRL

City  
CRAWLEY

State  
WV

Zip Code  
24931

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465022**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NIEMCZYK, MICHAEL, , MR,

Mailing Address 1502 MAHOGANY RUN DR

City  
LA GRANGEState  
KYZip Code  
40031-8936FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465023

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FORSTER, DAVID, , MR,

Mailing Address PO BOX 330

City  
COLUSAState  
CAZip Code  
95932-0330FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465024

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOJCIECHOWSKI, ROBERT, , ,

Mailing Address 862 RIVER RIDGE CIR

City  
WATERFORDState  
WIZip Code  
53185-3391FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465025

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POOLE, JIM, , ,

Mailing Address PO BOX 497

City  
UVALDA

State  
GA

Zip Code  
30473-0497

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465026

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICE, MARY, , ,

Mailing Address 556 E LOULA ST

City  
OLATHE

State  
KS

Zip Code  
66061-5402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GERSON COMPANY

Occupation (for Individual)  
RECEPTIONIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465027

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HASPELS, GERRIT, , ,

Mailing Address 2928 STARLING AVE

City  
SANBORN

State  
IA

Zip Code  
51248-7436

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARCHER COOP GRAIN

Occupation (for Individual)  
GRAIN HANDLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465028

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MUELLER, ROBERT, , MR,**

Mailing Address 11616 W GREENFIELD AVE APT 25

City  
WEST ALLIS

State  
WI

Zip Code  
53214-2153

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BAKER'S QUALITY PIZZA CRESTS

Occupation (for Individual)  
CLEANER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465029**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRANK, CHRIS, , MR,**

Mailing Address 303 MONTANA AVE

City  
SOUTH MILWAUKEE

State  
WI

Zip Code  
53172-2846

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MARED MECHANICAL CONTRACTORS

Occupation (for Individual)  
SHEET METAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465030**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAWTON, LARRY, , MR,**

Mailing Address 4062 SHORECREST DR

City  
ORLANDO

State  
FL

Zip Code  
32804-2225

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LAWTON BROS. INC.

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465031**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SAUER, FRED, , ,

Mailing Address 454 HAMMERSMITH RD

City  
SAINT LOUISState  
MOZip Code  
63141-8628FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ORION INVESTMENT COOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465032

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FUSSELL, LONNIE, , MR,

Mailing Address 1710 FREDERICKSBURG RD

City  
SAN ANTONIOState  
TXZip Code  
78201-5033FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
OPTICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465033

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VOYLES, STEPHEN, , ,

Mailing Address PO BOX 544

City  
FENTONState  
MOZip Code  
63026-0544FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465034

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, RONALD, , MR,**

Mailing Address 357 W STATE ST

City  
WAVERLY

State  
IL

Zip Code  
62692-1061

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WHALEN TRUCKING

Occupation (for Individual)  
DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465035**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NARCONIS, THOMAS, , MR,**

Mailing Address 2890 S MEDINA LINE RD

City  
WADSWORTH

State  
OH

Zip Code  
44281-8423

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTERRA CO-OP

Occupation (for Individual)  
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465036**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PEARSON, DANIEL, , MR, III**

Mailing Address 1940 MAYFLOWER DR

City  
DALLAS

State  
TX

Zip Code  
75208-3113

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
MUSIC TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465037**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOLLY, JAMES, , MR, JR**

Mailing Address PO BOX 826

City  
ANDERSON

State  
SC

Zip Code  
29622-0826

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOGAN & JOLLY, LLC

Occupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465038**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HORNER, ROBERT, , MR,**

Mailing Address 13318 FARM ROAD 2195

City  
CASSVILLE

State  
MO

Zip Code  
65625-7485

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REQUESTED INFO

Occupation (for Individual)  
REQUESTED INFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465039**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUNDY, CURTIS, , ,**

Mailing Address 14750 OLD PASCAGOULA RD

City  
GRAND BAY

State  
AL

Zip Code  
36541-4071

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465040**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, LARRY, , MR,**

Mailing Address HO 74 2B3

100943 LONG CANYON TRL

City

INYOKERN

State

CA

Zip Code

93527-3256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465041

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, PHIL, , MR,**

Mailing Address 10370 HUNTSMAN RD

City

COLORADO SPRINGS

State

CO

Zip Code

80908-4236

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465042

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CATCHPOLE, LAWRENCE, , ,**

Mailing Address 3911 DILL DR

City

WATERFORD

State

MI

Zip Code

48329-2137

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465043

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WARWICK, STEVEN, , MR,**

Mailing Address 2744 VAN CLIBURN CIR

City  
MIDDLETOWN

State  
DE

Zip Code  
19709-3201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465044**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WELEGALA, CHARLES, , MR,**

Mailing Address 17631 LISA VALLEY CT

City  
WILDWOOD

State  
MO

Zip Code  
63005-4267

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465045**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORGAN, KENNETH, , MR,**

Mailing Address 2617 E KINGS AVE

City  
PHOENIX

State  
AZ

Zip Code  
85032-2927

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465046**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAUER, ANNA, , ,**

Mailing Address 1013 BEECH ST

City  
EAST LANSING

State  
MI

Zip Code  
48823-3505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465047**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHURCH, GARY, , MR,**

Mailing Address 2023 BLACKS RD SW

City  
HEBRON

State  
OH

Zip Code  
43025-9776

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465048**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALTMAN, JAMES, , MR,**

Mailing Address 137 HARRIET AVE

City  
TRIADELPHIA

State  
WV

Zip Code  
26059-1415

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465049**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MYHRLAND, NORMAN, , MR,**

Mailing Address 3 SINGLELEAF PL

City  
DERRY

State  
NH

Zip Code  
03038-7360

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465050**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ECKRICH, GEOFFREY, , MR,**

Mailing Address 1601 S AIRPORT DR LOT 374

City

WESLACO

State

TX

Zip Code

78596-4566

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465051**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINCH, ROGER, , MR,**

Mailing Address 2611 SAN LUIS ST

City

LAS VEGAS

State

NV

Zip Code

89115-4235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465052**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 136 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOORE, JAMES, , ,**

Mailing Address 807 BETTY ST

City  
SPRINGDALE

State  
AR

Zip Code  
72762-3862

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALMART

Occupation (for Individual)  
STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465053**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JONES, DOUGLAS, , MR,**

Mailing Address 1548 WOODLAND LAKE RD

City

WARREN CENTER

State  
PA

Zip Code  
18851-7907

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DICK'S SPORTING GOODS DC

Occupation (for Individual)  
MAINTENANCE TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465054**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ETHELTON, VICKI, , ,**

Mailing Address 6282 N 31ST ST

City

PHOENIX

State  
AZ

Zip Code  
85016-2354

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LANDMARK TITLE ASSURANCE AGENCY

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465055**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JACKSON, GEORGE, , MR,

Mailing Address 4155 PITTMAN RD

City  
ATLANTAState  
GAZip Code  
30349-1440FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TCI OF ALABAMA, LLCOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465056

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEDWON, RONALD, , MR,

Mailing Address 3565 SANDY CREEK DR

City  
SHELBY TOWNSHIPState  
MIZip Code  
48316-3959FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PRAIRIE FARM DAIRY COMPANYOccupation (for Individual)  
DRIVER SALESMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465057

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STOCKER, ALAN, , MR,

Mailing Address 3140 DURWOOD DR

City  
FLORISSANTState  
MOZip Code  
63033-6212FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AUTOMOBILE CLUB OF MISSOURIOccupation (for Individual)  
DISPATCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465058

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STUTSMAN, CARLO, , MR,**

Mailing Address 3660 ROBINSON CREEK RD

City  
UKIAH

State  
CA

Zip Code  
95482-8900

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
GENERAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465059**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GONZLES, LUIS, , MR,**

Mailing Address 871 ROAD 4990

City

BLOOMFIELD

State

NM

Zip Code

87413-9623

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CNJ OILFIELD SERVICE

Occupation (for Individual)  
MECHANIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465060**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BACAK, JOSEPH, , MR,**

Mailing Address 1745 OVERLAND AVE NE

City

WARREN

State

OH

Zip Code

44483-2860

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AJAX TACCO MAGNETHERMIC

Occupation (for Individual)  
PRODUCT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465061**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 139 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WATSON, JAMES, , MR,

Mailing Address 1059 GALLEN CT

City  
MOBILEState  
ALZip Code  
36608-3617FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465062

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCDONALD, CHARLES, , MR,

Mailing Address PO BOX 14513

City  
HUNTSVILLEState  
ALZip Code  
35815-0513FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SECURITY ENGINEERS, INCOccupation (for Individual)  
SECURITY OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465063

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHEPHERD, ROBERT, , MR,

Mailing Address 1629 OLD XENIA RD SW

City  
LONDONState  
OHZip Code  
43140-9250FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

494.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465114

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 140 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KRONBERG, THOMAS, , MR,

Mailing Address 66596 WAYMIRE RD

City  
NORTH BENDState  
ORZip Code  
97459-7565FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465115

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HIGA, JACK, , MR,

Mailing Address 913 8TH AVE

City  
HONOLULUState  
HIZip Code  
96816-7125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465116

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ADKINS, GLENN, , ,

Mailing Address 7219 NICKABURR CREEK DR

City  
MAGNOLIAState  
TXZip Code  
77354-5976FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465117

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 141 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAYNARD, KAY, , ,

Mailing Address 405 WILDLIFE DR

City  
SOMERSETState  
KYZip Code  
42503-6254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465118

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HASENFRATZ, JAMES, , MR,

Mailing Address 3081 COUNTY ROAD 14

City  
WOODVILLEState  
OHZip Code  
43469-9760FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465119

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, JERRY, , MR,

Mailing Address 644 S MAIN ST

City  
GEORGETOWNState  
ILZip Code  
61846-1933FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465120

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DOWNING, CARL, , MR, JR**

Mailing Address 2801 S MCKINLEY ST

City  
CASPER

State  
WY

Zip Code  
82601-5737

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465121

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOUGLASS, OLIVER, , MR,**

Mailing Address 5108 CEDAR LAWN WAY

City

LAS VEGAS

State

NV

Zip Code

89130-3659

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465122

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HART, ROBERT, , MR,**

Mailing Address 1001 HIGHLAND ST

City

BRADDOCK

State

PA

Zip Code

15104-2120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465123

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LORENZEN, ROGER, , ,**

Mailing Address 2303 COUNTY ROAD D25

City  
HORNICK

State  
IA

Zip Code  
51026-8132

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465124**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ESPER, TOM, , MR,**

Mailing Address 3507 KNIGHT RD NE

City

WASHINGTON COURT HOUSE

State

OH

Zip Code

43160-9328

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465125**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, ROBERT, , MR,**

Mailing Address 310 MARSH AVE

City

RALEIGH

State

NC

Zip Code

27606-1343

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465126**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PURFIELD, JOSEPH, , MR,**

Mailing Address 5 GARDEN CIR

City  
WEST CHESTER

State  
PA

Zip Code  
19382-7315

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465127

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARTWRIGHT, ROBERT, , MR,**

Mailing Address 811 BASHAM DR

City  
CHARLESTOWN

State  
IN

Zip Code  
47111-1907

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465128

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETTITT, JOHN, , MR,**

Mailing Address PO BOX 547

City  
CORVALLIS

State  
MT

Zip Code  
59828-0547

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465129

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 145 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROBERTS, BILL, , MR,**

Mailing Address 507 NORTHGATE TRL

City  
GREENVILLE

State  
TX

Zip Code  
75402-3220

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465130**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ABBITT, CHARLES, , MR,**

Mailing Address 527 PARK LN

City  
RICHARDSON

State  
TX

Zip Code  
75081-4275

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465131**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAMRON, JOHN, , MR,**

Mailing Address 15 ESTATES RD

City  
ALLEN

State  
TX

Zip Code  
75002-7625

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465132**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BILLINGS, STEVE, , MR,**

Mailing Address 18 OLD AIRPORT RD NW

City  
ROME

State  
GA

Zip Code  
30165-2002

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465133**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, M, , MR,**

Mailing Address 31632B BETHEL CHURCH RD

City  
PAOLA

State  
KS

Zip Code  
66071-5803

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465134**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLANK, GARY, , MR,**

Mailing Address 1755 RAKE AVE

City  
GARNER

State  
IA

Zip Code  
50438-8654

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465135**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 147 OF 239  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MALCOLM, REBECCA, , MS,**

Mailing Address PO BOX 480797

City  
KANSAS CITYState  
MOZip Code  
64148-0797FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

Transaction ID : 83465136

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRITTEN, WILLIAM, , MR,**

Mailing Address 9616 DENEEN DR

City  
NOBLESVILLEState  
INZip Code  
46060-1531FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

Transaction ID : 83465137

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURTIS, LAWRENCE, , ,**

Mailing Address 4160 STATE ROUTE 40

City  
ARGYLEState  
NYZip Code  
12809-3481FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

Transaction ID : 83465138

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STONE, KENNETH, , MR,**

Mailing Address 6 BUD FIELD DR

City  
PALM COAST

State  
FL

Zip Code  
32137-9477

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465139**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUTTON, JAMES, , MR,**

Mailing Address 3906 SARAH DR

City  
WESLEY CHAPEL

State  
FL

Zip Code  
33543-5070

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465140**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEELY, JAMES, , MR,**

Mailing Address 1626 S WILLOW CT

City  
DENVER

State  
CO

Zip Code  
80231-2929

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465141**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JENSEN, CHARLES, , MR,**

Mailing Address PO BOX 604

City  
SAINT JOHNS

State  
AZ

Zip Code  
85936-0604

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465142**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAYLOR, JOHN, , MR,**

Mailing Address 62089 LAKE ST

City  
CASSOPOLIS

State  
MI

Zip Code  
49031-9322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465143**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIGGS, BROWNING, , MR,**

Mailing Address 103 LAPINE DR

City  
ABBEVILLE

State  
AL

Zip Code  
36310-2717

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465144**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALBRITTON, STARKE, , MR,**

Mailing Address PO BOX 233

City  
CAMDEN

State  
AL

Zip Code  
36726-0233

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465145

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GETZ, SAMUEL, , MR,**

Mailing Address 9453 FERGUSON VALLEY RD

City  
LEWISTOWN

State  
PA

Zip Code  
17044-8629

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465146

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, DELBERT, , MR, JR**

Mailing Address 440 NW 96TH ST

City  
OKLAHOMA CITY

State  
OK

Zip Code  
73114-6139

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465147

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 151 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANNING, KENNETH, , MR,**

Mailing Address 725 HELMS WAY

City  
CONWAY

State  
SC

Zip Code  
29526-9060

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465148**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OSULLIVAN, JOHN, , MR,**

Mailing Address 175 CONKLIN ST

City

SOUTH PLAINFIELD

State

NJ

Zip Code

07080-3628

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465149**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CURRAN, THOMAS, , MR, JR**

Mailing Address 3907 CLANCY CT

City

BAKERSFIELD

State

CA

Zip Code

93311-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465150**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 152 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BURNSIDE, THOMAS, , MR,**

Mailing Address **GENERAL DELIVERY**

City  
**KANSAS**

State  
**IL**

Zip Code  
**61933-9999**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**12 / 31 / 2020**

**Transaction ID : 83465151**

Amount of Each Receipt this Period

**0.00**

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALANIS, DANIEL, , MR, III**

Mailing Address **1678 GOAT HILL RD**

City  
**LAKEHILLS**

State  
**TX**

Zip Code  
**78063-6856**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**234.00**

Date of Receipt

**12 / 31 / 2020**

**Transaction ID : 83465152**

Amount of Each Receipt this Period

**0.00**

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VIRTIS, CHARLES, , MR,**

Mailing Address **5812 STATE ROUTE 54**

City  
**MECHANICSBURG**

State  
**OH**

Zip Code  
**43044-9753**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**201.00**

Date of Receipt

**12 / 31 / 2020**

**Transaction ID : 83465153**

Amount of Each Receipt this Period

**0.00**

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**0.00**



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LITZINGER, JOHN, , MR,**

Mailing Address 5410 BARBADOS SQ

City  
VERO BEACH

State  
FL

Zip Code  
32967-7676

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465154**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GARNER, LANE, , ,**

Mailing Address 3415 CANTON ST

City  
GREENVILLE

State  
TX

Zip Code  
75402-6211

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
UNEMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465155**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAMBERT, LARRY, , MR,**

Mailing Address 1803 EUSTIS ST

City  
LAUDERDALE

State  
MN

Zip Code  
55113-5219

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MINVALCO

Occupation (for Individual)  
CITY DESK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465156**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CEJA, ROBERT, , MR,**

Mailing Address 2450 LEWIS ST

City  
BLUE ISLAND

State  
IL

Zip Code  
60406-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALMART

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465157**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GEBHARDT, MARK, , MR,**

Mailing Address PO BOX 340

City  
CEDAR SPRINGS

State  
MI

Zip Code  
49319-0340

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GEBHARDT INSURANCE AGENCY

Occupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465158**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELLIOTT, GENE, , MR,**

Mailing Address 9 WILLIS CT

City  
WASHINGTON COURT HOU

State  
OH

Zip Code  
43160-1073

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465159**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PFISTERER, DIETER, , MR,**

Mailing Address 757 MCCOY RD

City  
FRANKLIN LAKES

State  
NJ

Zip Code  
07417-1228

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PFISTER MAINTENANCE

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465160**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, KYLE, , MR,**

Mailing Address 8801 TARTER AVE APT 609

City  
AMARILLO

State  
TX

Zip Code  
79119-6360

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TEXAS DEPARTMENT OF AGRICULTURE

Occupation (for Individual)  
INVESTIGATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465161**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BYLER, TIMOTHY, , MR,**

Mailing Address 7495 S COUNTY ROAD 6 E

City  
MONTE VISTA

State  
CO

Zip Code  
81144-9634

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF TIMWIN HOMES

Occupation (for Individual)  
CARPENTRY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465162**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUSNACK, CHARLES, , MR,**

Mailing Address 1004 CALIFON COKESBURY RD

City  
LEBANON

State  
NJ

Zip Code  
08833-4541

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465163**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRECK, ALAN, , MR,**

Mailing Address 15510 BIRWOOD AVE

City

BEVERLY HILLS

State

MI

Zip Code

48025-3328

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465164**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERCIER, TERENCE, , MR,**

Mailing Address 2906 25TH AVE

City

KENOSHA

State

WI

Zip Code

53140-2057

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465165**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCARBOROUGH, R, , MR,**

Mailing Address 125 BURNEY RD

City  
BRUNSWICK

State  
GA

Zip Code  
31523-6008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465166

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLINS, RONALD, , MR,**

Mailing Address 2402 MOUND AVE

City  
PANAMA CITY

State  
FL

Zip Code  
32405-1339

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465167

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LATKA, THOMAS, , MR,**

Mailing Address 46112 GREEN VALLEY CT

City  
PLYMOUTH

State  
MI

Zip Code  
48170-3526

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465168

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETTY, SCOTT, , MR,**

Mailing Address PO BOX 1165

City  
SARATOGA

State  
WY

Zip Code  
82331-1165

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465169

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RADER, SAMUEL, , MR,**

Mailing Address 26 HERON CT

City  
BAILEY

State  
CO

Zip Code  
80421-2406

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465170

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COLE, HERBERT, , MR,**

Mailing Address 4584 COLE LN

City  
PETERSBURG

State  
PA

Zip Code  
16669-2025

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465171

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARTER, TOM, , MR,

Mailing Address PO BOX 93

City  
DE SOTO

State  
IL

Zip Code  
62924-0093

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465172

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAMMANS, BILLY, , ,

Mailing Address 711 E TANYA TRL

City  
PHOENIX

State  
AZ

Zip Code  
85086-0706

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465173

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARBISON, KENT, , MR,

Mailing Address 1940 CLARK RUN RD

City  
XENIA

State  
OH

Zip Code  
45385-9447

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465174

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KLEBERG, RICHARD, M, MR, III**

Mailing Address PO BOX 17777

City  
SAN ANTONIO

State  
TX

Zip Code  
78217-0777

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465175**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCDARIS, MICHAEL, , MR,**

Mailing Address 11631 MOONLIGHT MEADOW DR

City  
CIBOLO

State  
TX

Zip Code  
78108-3879

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465176**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HALVORSON, NORMAN, , MR,**

Mailing Address 39513 285TH ST SE

City  
GULLY

State  
MN

Zip Code  
56646-4003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465177**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KNUCKLES, CARTER, , MR,**

Mailing Address 9710 HIGHWAY J

City  
BOURBON

State  
MO

Zip Code  
65441-9612

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465178**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WELCH, LESTER, , MR,**

Mailing Address 308 HAVERHILL ST

City  
NORTH READING

State  
MA

Zip Code  
01864-1448

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465179**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DURRANCE, J, D, MR,**

Mailing Address PO BOX 2414

City  
BARTOW

State  
FL

Zip Code  
33831-2414

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465180**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POPOV, JOHN, , MR, JR

Mailing Address 612 TILLOTSON ST

City  
COLLINSVILLEState  
ILZip Code  
62234-3640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465181

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KORF, CLIFFORD, , MR,

Mailing Address 1325 BOBWHITE CIR

City  
FIRTHState  
NEZip Code  
68358-7577FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465182

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILKINSON, SHERMAN, , MR,

Mailing Address 119 1ST ST

City  
PALATKAState  
FLZip Code  
32177-8954FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465183

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUTKA, MARK, J, MR,**

Mailing Address 1020 JAMAICA ST

City  
AURORA

State  
CO

Zip Code  
80010-4031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465184**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUTLER, DAVID, , MR,**

Mailing Address 617 RICH ST

City  
SLATER

State  
MO

Zip Code  
65349-1253

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465185**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, LARRY, , MR,**

Mailing Address 705 SW 24TH ST

City  
JOSHUA

State  
TX

Zip Code  
76058-3377

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465186**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JOHNSON, STEVEN, , MR,**

Mailing Address 6155 FLORES RD

City  
ATASCADERO

State  
CA

Zip Code  
93422-3610

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465187

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLLECCHI, TODD, , MR,**

Mailing Address PO BOX 363

City  
SOUTH PRAIRIE

State  
WA

Zip Code  
98385-0363

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465188

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHARP, NORMAN, , MR,**

Mailing Address 154 RED WELL RD

City  
NEW HOLLAND

State  
PA

Zip Code  
17557-9515

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465189

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LONG, JOHN, , ,**

Mailing Address 9820 ATWOOD DR

City  
SOUTH LYON

State  
MI

Zip Code  
48178-9111

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465190**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MERRELL, TERESA, , MRS,**

Mailing Address 5088 SHOESTRING TRL

City  
CRAWLEY

State  
WV

Zip Code  
24931

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465191**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NIEMCZYK, MICHAEL, , MR,**

Mailing Address 1502 MAHOGANY RUN DR

City  
LA GRANGE

State  
KY

Zip Code  
40031-8936

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465192**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FORSTER, DAVID, , MR,

Mailing Address PO BOX 330

City  
COLUSA

State  
CA

Zip Code  
95932-0330

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465193

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOJCIECHOWSKI, ROBERT, , ,

Mailing Address 862 RIVER RIDGE CIR

City

WATERFORD

State

WI

Zip Code

53185-3391

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465194

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POOLE, JIM, , ,

Mailing Address PO BOX 497

City

UVALDA

State

GA

Zip Code

30473-0497

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465195

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RICE, MARY, , ,**

Mailing Address 556 E LOULA ST

City  
OLATHE

State  
KS

Zip Code  
66061-5402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GERSON COMPANY

Occupation (for Individual)  
RECEPTIONIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465196**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HASPELS, GERRIT, , ,**

Mailing Address 2928 STARLING AVE

City  
SANBORN

State  
IA

Zip Code  
51248-7436

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARCHER COOP GRAIN

Occupation (for Individual)  
GRAIN HANDLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465197**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MUELLER, ROBERT, , MR,**

Mailing Address 11616 W GREENFIELD AVE APT 25

City  
WEST ALLIS

State  
WI

Zip Code  
53214-2153

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BAKER'S QUALITY PIZZA CRESTS

Occupation (for Individual)  
CLEANER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465198**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FRANK, CHRIS, , MR,**

Mailing Address 303 MONTANA AVE

City  
SOUTH MILWAUKEE

State  
WI

Zip Code  
53172-2846

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MARED MECHANICAL CONTRACTORS

Occupation (for Individual)  
SHEET METAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465199**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAWTON, LARRY, , MR,**

Mailing Address 4062 SHORECREST DR

City  
ORLANDO

State  
FL

Zip Code  
32804-2225

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LAWTON BROS. INC.

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465200**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAUER, FRED, , ,**

Mailing Address 454 HAMMERSMITH RD

City  
SAINT LOUIS

State  
MO

Zip Code  
63141-8628

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ORION INVESTMENT CO

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465201**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FUSSELL, LONNIE, , MR,

Mailing Address 1710 FREDERICKSBURG RD

City  
SAN ANTONIO

State  
TX

Zip Code  
78201-5033

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
OPTICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83465202

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VOYLES, STEPHEN, , ,

Mailing Address PO BOX 544

City  
FENTON

State  
MO

Zip Code  
63026-0544

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83465203

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDERSON, RONALD, , MR,

Mailing Address 357 W STATE ST

City  
WAVERLY

State  
IL

Zip Code  
62692-1061

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WHALEN TRUCKING

Occupation (for Individual)  
DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2020

Transaction ID : 83465204

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NARCONIS, THOMAS, , MR,**

Mailing Address 2890 S MEDINA LINE RD

City  
WADSWORTH

State  
OH

Zip Code  
44281-8423

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTERRA CO-OP

Occupation (for Individual)  
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465205**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PEARSON, DANIEL, , MR, III**

Mailing Address 1940 MAYFLOWER DR

City  
DALLAS

State  
TX

Zip Code  
75208-3113

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
MUSIC TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465206**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOLLY, JAMES, , MR, JR**

Mailing Address PO BOX 826

City  
ANDERSON

State  
SC

Zip Code  
29622-0826

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOGAN & JOLLY, LLC

Occupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465207**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HORNER, ROBERT, , MR,**

Mailing Address 13318 FARM ROAD 2195

City  
CASSVILLE

State  
MO

Zip Code  
65625-7485

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

REQUESTED INFO

Occupation (for Individual)

REQUESTED INFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465208

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUNDY, CURTIS, , ,**

Mailing Address 14750 OLD PASCAGOULA RD

City  
GRAND BAY

State  
AL

Zip Code  
36541-4071

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465209

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATSON, LARRY, , MR,**

Mailing Address HO 74 2B3  
100943 LONG CANYON TRL

City  
INYOKERN

State  
CA

Zip Code  
93527-3256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465210

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, PHIL, , MR,**

Mailing Address 10370 HUNTSMAN RD

City  
COLORADO SPRINGS

State  
CO

Zip Code  
80908-4236

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465211**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CATCHPOLE, LAWRENCE, , ,**

Mailing Address 3911 DILL DR

City  
WATERFORD

State  
MI

Zip Code  
48329-2137

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465212**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WARWICK, STEVEN, , MR,**

Mailing Address 2744 VAN CLIBURN CIR

City  
MIDDLETOWN

State  
DE

Zip Code  
19709-3201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465213**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WELEGALA, CHARLES, , MR,

Mailing Address 17631 LISA VALLEY CT

City  
WILDWOOD

State  
MO

Zip Code  
63005-4267

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465214

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORGAN, KENNETH, , MR,

Mailing Address 2617 E KINGS AVE

City  
PHOENIX

State  
AZ

Zip Code  
85032-2927

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465215

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAUER, ANNA, , ,

Mailing Address 1013 BEECH ST

City  
EAST LANSING

State  
MI

Zip Code  
48823-3505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465216

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHURCH, GARY, , MR,

Mailing Address 2023 BLACKS RD SW

City  
HEBRONState  
OHZip Code  
43025-9776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

Transaction ID : 83465217

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALTMAN, JAMES, , MR,

Mailing Address 137 HARRIET AVE

City  
TRIADELPHIAState  
WVZip Code  
26059-1415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

Transaction ID : 83465218

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MYHRLAND, NORMAN, , MR,

Mailing Address 3 SINGLELEAF PL

City  
DERRYState  
NHZip Code  
03038-7360FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

Transaction ID : 83465219

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ECKRICH, GEOFFREY, , MR,

Mailing Address 1601 S AIRPORT DR LOT 374

City  
WESLACO

State  
TX

Zip Code  
78596-4566

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465220

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINCH, ROGER, , MR,

Mailing Address 2611 SAN LUIS ST

City  
LAS VEGAS

State  
NV

Zip Code  
89115-4235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465221

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOORE, JAMES, , ,

Mailing Address 807 BETTY ST

City  
SPRINGDALE

State  
AR

Zip Code  
72762-3862

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WALMART

Occupation (for Individual)  
STOCKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465222

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JONES, DOUGLAS, , MR,**

Mailing Address 1548 WOODLAND LAKE RD

City  
WARREN CENTER

State  
PA

Zip Code  
18851-7907

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DICK'S SPORTING GOODS DC

Occupation (for Individual)  
MAINTENANCE TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465223**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ETHELTON, VICKI, , ,**

Mailing Address 6282 N 31ST ST

City  
PHOENIX

State  
AZ

Zip Code  
85016-2354

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LANDMARK TITLE ASSURANCE AGENCY

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465224**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACKSON, GEORGE, , MR,**

Mailing Address 4155 PITTMAN RD

City  
ATLANTA

State  
GA

Zip Code  
30349-1440

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TCI OF ALABAMA, LLC

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465225**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEDWON, RONALD, , MR,

Mailing Address 3565 SANDY CREEK DR

City  
SHELBY TOWNSHIP

State  
MI

Zip Code  
48316-3959

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PRAIRIE FARM DAIRY COMPANY

Occupation (for Individual)  
DRIVER SALESMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465226

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STOCKER, ALAN, , MR,

Mailing Address 3140 DURWOOD DR

City  
FLORISSANT

State  
MO

Zip Code  
63033-6212

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AUTOMOBILE CLUB OF MISSOURI

Occupation (for Individual)  
DISPATCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465227

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STUTSMAN, CARLO, , MR,

Mailing Address 3660 ROBINSON CREEK RD

City  
UKIAH

State  
CA

Zip Code  
95482-8900

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
GENERAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465228

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GONZLES, LUIS, , MR,**

Mailing Address 871 ROAD 4990

City  
BLOOMFIELD

State  
NM

Zip Code  
87413-9623

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CNJ OILFIELD SERVICE

Occupation (for Individual)  
MECHANIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465229**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BACAK, JOSEPH, , MR,**

Mailing Address 1745 OVERLAND AVE NE

City  
WARREN

State  
OH

Zip Code  
44483-2860

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AJAX TACCO MAGNETHERMIC

Occupation (for Individual)  
PRODUCT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465230**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATSON, JAMES, , MR,**

Mailing Address 1059 GALLEN CT

City  
MOBILE

State  
AL

Zip Code  
36608-3617

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2020

**Transaction ID : 83465231**

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 179 OF 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCDONALD, CHARLES, , MR,

Mailing Address PO BOX 14513

City  
HUNTSVILLEState  
ALZip Code  
35815-0513FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SECURITY ENGINEERS, INCOccupation (for Individual)  
SECURITY OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

Transaction ID : 83465232

Amount of Each Receipt this Period

0.00

☒ Memo Item

ADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOPPER, BILLY B, , MR,

Mailing Address PO BOX 353

City  
MENTONEState  
TXZip Code  
79754-0353FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 23 / 2020

Transaction ID : 83519127

Amount of Each Receipt this Period

0.00

☒ Memo Item

Refund(s) on Schedule B Totalling \$500.00 This  
changes the YTD Total to \$4500.00

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

34191.75

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 180 OF 239

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. UNITED STATES POSTAL SERVICE**

Mailing Address USPOSTAL

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Postage

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	05	/	2020

FEC Identification Number

C

Transaction ID : 83292290

Amount of Each Disbursement this Period

- 5250.00

Postage

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UNITED STATES POSTAL SERVICE**

Mailing Address USPOSTAL

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Prepaid postage

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	09	/	2020

FEC Identification Number

C

Transaction ID : 83300822

Amount of Each Disbursement this Period

1750.00

Prepaid postage

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NATIONAL RIFLE ASSOCIATION OF AMERICA**

Mailing Address 11250 WAPLES MILL ROAD

City  
FAIRFAXState  
VAZip Code  
22030Purpose of Disbursement  
WEB HOSTING/SERVICE FEE

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	14	/	2020

FEC Identification Number

C

Transaction ID : 83314782

Amount of Each Disbursement this Period

2000.00

WEB HOSTING/SERVICE FEE

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

- 1500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 181 OF 239

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. SAVANNAH CONVENTION CENTER**

Mailing Address P.O. BOX 248

City  
SAVANNAHState  
GAZip Code  
31402Purpose of Disbursement  
Pre-payment for event on December 15, 2020

004

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				15				2020					

FEC Identification Number

C

**Transaction ID : 83326024**

Amount of Each Disbursement this Period

- 800.00

☐ Memo Item Pre-payment for event on  
December 15, 2020

Full Name (Last, First, Middle Initial)

**B. CITY OF MORROW**

Mailing Address 1500 MORROW STREET

City  
MORROWState  
GAZip Code  
30260Purpose of Disbursement  
Prepayment for event on December 16, 2020

004

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				16				2020					

FEC Identification Number

C

**Transaction ID : 83331966**

Amount of Each Disbursement this Period

- 2143.80

☐ Memo Item Prepayment for event on December  
16, 2020

Full Name (Last, First, Middle Initial)

**C. UNITED STATES POSTAL SERVICE**

Mailing Address USPOSTAL

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Prepaid postage

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				15				2020					

FEC Identification Number

C

**Transaction ID : 83331972**

Amount of Each Disbursement this Period

- 1750.00

☐ Memo Item Prepaid postage
**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

- 4693.80

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 182 OF 239

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. KULIVAN, KAREN, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2020

Mailing Address 11250 WAPLES MILL ROAD

City  
FAIRFAXState  
VAZip Code  
22030-7550

FEC Identification Number

**C****Transaction ID : 83332904**

Amount of Each Disbursement this Period

1750.00

Purpose of Disbursement

Reimbursement for cost of postage paid by employee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

☐ Reimbursement for cost of postage  
Memo Item paid by employee

Full Name (Last, First, Middle Initial)

**B. UNITED STATES POSTAL SERVICE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2020

Mailing Address USPOSTAL

City  
WASHINGTONState  
DCZip Code  
20036

FEC Identification Number

**C****Transaction ID : 83339385**

Amount of Each Disbursement this Period

1750.00

Purpose of Disbursement

Ultimate vendor for employee refund on 12/17/2020 Ultimate vendor for employee refund on 12/17/2020

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

☒ Memo Item Ultimate vendor for employee refund on 12/17/2020 Ultimate vendor for employee refund on 12/17/2020

Full Name (Last, First, Middle Initial)

**C. UNITED STATES POSTAL SERVICE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2020

Mailing Address USPOSTAL

City  
WASHINGTONState  
DCZip Code  
20036

FEC Identification Number

**C****Transaction ID : 83339386**

Amount of Each Disbursement this Period

- 1750.00

Purpose of Disbursement

Prepaid postage

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

☐ Prepaid postage  
Memo Item
**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 183 OF 239

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
Pre-payment for December P2P texting program

004

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2020

FEC Identification Number

C

**Transaction ID : 83354234**

Amount of Each Disbursement this Period

89360.94

☐ Memo Item Pre-payment for December P2P  
texting program

Full Name (Last, First, Middle Initial)

**B. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texts (IE paid 12/1/20; see Schedule E)

004

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2020

FEC Identification Number

C

**Transaction ID : 83354235**

Amount of Each Disbursement this Period

- 5.34

☐ Memo Item P2P Texts (IE paid 12/1/20; see  
Schedule E)

Full Name (Last, First, Middle Initial)

**C. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texts (IE paid 12/1/20; see Schedule E)

004

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2020

FEC Identification Number

C

**Transaction ID : 83354236**

Amount of Each Disbursement this Period

- 107.58

☐ Memo Item P2P Texts (IE paid 12/1/20; see  
Schedule E)**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89248.02



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 184 OF 239

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texts (IE paid 12/1/20; see Schedule E)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

004  
Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			19			2020			

FEC Identification Number

C

**Transaction ID : 83354237**

Amount of Each Disbursement this Period

- 3875.94

☐ P2P Texts (IE paid 12/1/20; see  
Memo Item Schedule E)

Full Name (Last, First, Middle Initial)

**B. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texts (IE paid 12/1/20; see Schedule E)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

004  
Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2020			

FEC Identification Number

C

**Transaction ID : 83354238**

Amount of Each Disbursement this Period

- 1133.64

☐ P2P Texts (IE paid 12/1/20; see  
Memo Item Schedule E)

Full Name (Last, First, Middle Initial)

**C. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texts (IE paid 12/1/20; see Schedule E)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

004  
Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			16			2020			

FEC Identification Number

C

**Transaction ID : 83354239**

Amount of Each Disbursement this Period

- 8.28

☐ P2P Texts (IE paid 12/1/20; see  
Memo Item Schedule E)**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

- 5017.86



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 185 OF 239

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texts (IE paid 12/1/20; see Schedule E)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

004

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				15				2020					

FEC Identification Number

C

**Transaction ID : 83354240**

Amount of Each Disbursement this Period

- 4361.46

☐ P2P Texts (IE paid 12/1/20; see  
Memo Item Schedule E)

Full Name (Last, First, Middle Initial)

**B. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texts (IE paid 12/1/20; see Schedule E)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

004

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				14				2020					

FEC Identification Number

C

**Transaction ID : 83354241**

Amount of Each Disbursement this Period

- 6379.92

☐ P2P Texts (IE paid 12/1/20; see  
Memo Item Schedule E)

Full Name (Last, First, Middle Initial)

**C. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texts (IE paid 12/1/20; see Schedule E)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

004

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				12				2020					

FEC Identification Number

C

**Transaction ID : 83354242**

Amount of Each Disbursement this Period

- 18013.14

☐ P2P Texts (IE paid 12/1/20; see  
Memo Item Schedule E)**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

- 28754.52

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 186 OF 239

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texts (IE paid 12/1/20; see Schedule E)

004

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				08				2020					

FEC Identification Number

C

**Transaction ID : 83354243**

Amount of Each Disbursement this Period

- 45.36

☐ Memo Item P2P Texts (IE paid 12/1/20; see Schedule E)

Full Name (Last, First, Middle Initial)

**B. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texts (IE paid 12/1/20; see Schedule E)

004

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				05				2020					

FEC Identification Number

C

**Transaction ID : 83354244**

Amount of Each Disbursement this Period

- 21002.94

☐ Memo Item P2P Texts (IE paid 12/1/20; see Schedule E)

Full Name (Last, First, Middle Initial)

**C. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texts (IE paid 12/1/20; see Schedule E)

004

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				03				2020					

FEC Identification Number

C

**Transaction ID : 83354245**

Amount of Each Disbursement this Period

- 3246.12

☐ Memo Item P2P Texts (IE paid 12/1/20; see Schedule E)
**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

- 24294.42

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 187 OF 239

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texts (IE paid 12/1/20; see Schedule E)

004

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2020

FEC Identification Number

C

**Transaction ID : 83354246**

Amount of Each Disbursement this Period

- 1190.34

☐ P2P Texts (IE paid 12/1/20; see  
Memo Item Schedule E)

Full Name (Last, First, Middle Initial)

**B. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texts (IE paid 12/1/20; see Schedule E)

004

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2020

FEC Identification Number

C

**Transaction ID : 83354247**

Amount of Each Disbursement this Period

- 1373.64

☐ P2P Texts (IE paid 12/1/20; see  
Memo Item Schedule E)

Full Name (Last, First, Middle Initial)

**C. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texts (IE paid 12/1/20; see Schedule E)

004

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		29		2020

FEC Identification Number

C

**Transaction ID : 83354248**

Amount of Each Disbursement this Period

- 8011.38

☐ P2P Texts (IE paid 12/1/20; see  
Memo Item Schedule E)**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

- 10575.36

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. BANK OF AMERICA**

Mailing Address 100 NORTH TRYON STREET

City  
CHARLOTTEState  
NCZip Code  
28255Purpose of Disbursement  
ACCOUNT ANALYSIS FEE

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				15				2020					

FEC Identification Number

C

Transaction ID : 83373277

Amount of Each Disbursement this Period

22.91

ACCOUNT ANALYSIS FEE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WELLS FARGO BANK, N.A.**

Mailing Address 1300 CHAIN BRIDGE ROAD

City  
MCLEANState  
VAZip Code  
22101Purpose of Disbursement  
ACCOUNT ANALYSIS FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				11				2020					

FEC Identification Number

C

Transaction ID : 83373278

Amount of Each Disbursement this Period

1051.27

ACCOUNT ANALYSIS FEES

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PAYMENTECH, INC.**

Mailing Address 4 NORTHEASTERN BLVD

City  
SALEMState  
NHZip Code  
03079Purpose of Disbursement  
CREDIT CARD FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2020					

FEC Identification Number

C

Transaction ID : 83413609

Amount of Each Disbursement this Period

990.37

CREDIT CARD FEES

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2064.55

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texting

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2020					

FEC Identification Number

C

**Transaction ID : 83427749**

Amount of Each Disbursement this Period

- 2798.94

P2P Texting

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texting

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				28				2020					

FEC Identification Number

C

**Transaction ID : 83427751**

Amount of Each Disbursement this Period

- 3192.78

P2P Texting

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. I360, LLC**

Mailing Address 29374 NETWORK PLACE

City  
CHICAGOState  
ILZip Code  
60673-1293Purpose of Disbursement  
P2P Texting

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				30				2020					

FEC Identification Number

C

**Transaction ID : 83427752**

Amount of Each Disbursement this Period

- 8239.86

P2P Texting

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

- 14231.58

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. CITY OF GAINESVILLE PARKS AND RECREATION**

Mailing Address 830 GREEN STREET NE

City  
GAINESVILLEState  
GAZip Code  
30501Purpose of Disbursement  
Event space rental - December 2, 2020

004

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2020

FEC Identification Number

C

Transaction ID : 83463708

Amount of Each Disbursement this Period

- 500.00

Event space rental - December 2,  
Memo Item 2020

Full Name (Last, First, Middle Initial)

**B. HILTON GARDEN INN**

Mailing Address 101 SOUTH FRONT STREET

City  
ALBANYState  
GAZip Code  
31701Purpose of Disbursement  
Event space rental - December 3, 2020

004

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2020

FEC Identification Number

C

Transaction ID : 83463710

Amount of Each Disbursement this Period

- 848.51

Event space rental - December 3,  
Memo Item 2020

Full Name (Last, First, Middle Initial)

**C. RAMADA AUGUSTA DOWNTOWN HOTEL & CONFERENCE CENTER**

Mailing Address 640 BROAD STREET

City  
AUGUSTAState  
GAZip Code  
30901Purpose of Disbursement  
Event space rental - December 1, 2020

004

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2020

FEC Identification Number

C

Transaction ID : 83463711

Amount of Each Disbursement this Period

- 1255.00

Event space rental - December 1,  
Memo Item 2020

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

- 2603.51

- 358.48

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 191 OF 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. ANNA PAULINA LUNA FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2020

Mailing Address 1201 GANDY BLVD N  
P.O. BOX 23064City  
SAINT PETERSBURGState  
FLZip Code  
33742Purpose of Disbursement  
Void - Anna Paulina Luna For Congress

011

Category/  
Type

Candidate Name

**LUNA ANNA, PAULINA, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2020  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 13

FEC Identification Number

C C00718239

**Transaction ID : 83356084**

Amount of Each Disbursement this Period

- 1000.00

☐ Memo Item Void - Anna Paulina Luna For Congress

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

- 1000.00

- 1000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 192 OF 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. HOPPER, BILLY B, , MR,**

Mailing Address PO BOX 353

City  
MENTONEState  
TXZip Code  
79754-0353Purpose of Disbursement  
Refund - over limit

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

010

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2020

FEC Identification Number

C

Transaction ID : 83354394

Amount of Each Disbursement this Period

500.00

Refund - over limit

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

500.00

500.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 193 OF 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. PROLIST INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2020

Mailing Address 4510 BUCKEYSTOWN PIKE, SUITE M

City  
FREDERICKState  
MDZip Code  
21704-7539Purpose of Disbursement  
Nonfederal independent expenditure

004

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 83283547

Amount of Each Disbursement this Period

862.79

☐ Memo Item Nonfederal independent expenditure

Full Name (Last, First, Middle Initial)

**B. NATIONAL RIFLE ASSOCIATION OF AMERICA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2020

Mailing Address 11250 WAPLES MILL ROAD

City  
FAIRFAXState  
VAZip Code  
22030Purpose of Disbursement  
Staff salaries and taxes (November 8-21, 2020)

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 83283549

Amount of Each Disbursement this Period

5072.21

☐ Memo Item Staff salaries and taxes (November 8-21, 2020)

Full Name (Last, First, Middle Initial)

**C. TEXANS FOR DADE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2020

Mailing Address 2825 NALL STREET, #19B

City  
PORT NECHESState  
TXZip Code  
77651Purpose of Disbursement  
DADE PHELAN, STATE HOUSE 21st TX

011

Category/  
Type

Candidate Name

PHELAN, DADE, , ,

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 83289813

Amount of Each Disbursement this Period

1000.00

☐ Memo Item DADE PHELAN, STATE HOUSE 21st TX

SUBTOTAL of Disbursements This Page (optional)..... ►

6935.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 194 OF 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. NATIONAL RIFLE ASSOCIATION OF AMERICA**

Mailing Address 11250 WAPLES MILL ROAD

City  
FAIRFAXState  
VAZip Code  
22030Purpose of Disbursement  
Salaries and taxes - Nov 22 to Dec 5, 2020

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2020

FEC Identification Number

**C****Transaction ID : 83314186**

Amount of Each Disbursement this Period

2294.21

Salaries and taxes - Nov 22 to Dec

☐ Memo Item 5, 2020

Full Name (Last, First, Middle Initial)

**B. PATRICK FOR COLORADO**

Mailing Address PO BOX 929

City  
FRANKTOWNState  
COZip Code  
80116Purpose of Disbursement  
Void - Patrick for Colorado

Candidate Name

**NEVILLE, PATRICK, , CO REP.,**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2020

FEC Identification Number

**C****Transaction ID : 83356180**

Amount of Each Disbursement this Period

- 200.00

Void - Patrick for Colorado

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PATRICK FOR COLORADO**

Mailing Address PO BOX 929

City  
FRANKTOWNState  
COZip Code  
80116Purpose of Disbursement  
Void - Patrick for Colorado

Candidate Name

**NEVILLE, PATRICK, , CO REP.,**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2020

FEC Identification Number

**C****Transaction ID : 83356979**

Amount of Each Disbursement this Period

- 200.00

Void - Patrick for Colorado

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1894.21

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 195 OF 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. NATIONAL RIFLE ASSOCIATION OF AMERICA**

Mailing Address 11250 WAPLES MILL ROAD

City  
FAIRFAXState  
VAZip Code  
22030Purpose of Disbursement  
Staff salaries and taxes (December 6-19)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

001

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12	/	29	/	2020

FEC Identification Number

C

Transaction ID : 83369416

Amount of Each Disbursement this Period

3032.00

Staff salaries and taxes (December  
Memo Item 6-19)**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
-----	---	-----	---	-------------

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
-----	---	-----	---	-------------

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3032.00

11861.21

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 196 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00053553         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>UNITED STATES POSTAL SERVICE</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>12 / 05 / 2020</div> </div>	
Mailing Address <b>USPOSTAL</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2625.00</div>	
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20036</b>	<b>Transaction ID : 83292292</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>12 / 05 / 2020</div> </div>
Purpose of Expenditure <b>IE - Postage</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: <b>PERDUE, DAVID, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">720689.41</div>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>UNITED STATES POSTAL SERVICE</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>12 / 05 / 2020</div> </div>	
Mailing Address <b>USPOSTAL</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2625.00</div>	
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20036</b>	<b>Transaction ID : 83292293</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>12 / 05 / 2020</div> </div>
Purpose of Expenditure <b>IE - Postage</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">717807.96</div>	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">5250.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Owens, G, , Robert,*

Signature

*[Electronically Filed]*

Date  /  /

01 / 29 / 2021

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 197 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00053553         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>UNITED STATES POSTAL SERVICE</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            12 / 15 / 2020         </div>		
Mailing Address <b>USPOSTAL</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           875.00         </div>		
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20036</b>	<b>Transaction ID : 83331974</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            12 / 15 / 2020         </div>		
Purpose of Expenditure <b>IE - Postage</b>		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>			
Name of Federal Candidate: <b>PERDUE, DAVID, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">960219.24</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>		

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>UNITED STATES POSTAL SERVICE</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            12 / 15 / 2020         </div>		
Mailing Address <b>USPOSTAL</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           875.00         </div>		
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20036</b>	<b>Transaction ID : 83331975</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            12 / 15 / 2020         </div>		
Purpose of Expenditure <b>IE - Postage</b>		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>			
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">957337.77</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>		

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1750.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Owens, G, , Robert, [Electronically Filed]

Signature \_\_\_\_\_ Date 

M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2021

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 198 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>UNITED STATES POSTAL SERVICE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>USPOSTAL</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">875.00</div>		
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20036</b>	<b>Transaction ID : 83339389</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - Postage</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>PERDUE, DAVID, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>		
Full Name of Payee <input type="checkbox"/> Memo Item <b>UNITED STATES POSTAL SERVICE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>USPOSTAL</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">875.00</div>		
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20036</b>	<b>Transaction ID : 83339390</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - Postage</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">1750.00</div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, Signature		<b>[Electronically Filed]</b>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 199 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>STAMPEDE AMERICA</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>MM / DD / YYYY</span> </div>	
Mailing Address 6609 WILLOW PARK DRIVE SUITE 100				Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>93750.00</span> </div>	
City NAPLES		State FL		Zip Code 34109	
Purpose of Expenditure IE - Canvassing				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: PERDUE, DAVID, , ,				Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: GA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>720689.41</span> </div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	
Full Name of Payee <input type="checkbox"/> Memo Item <b>STAMPEDE AMERICA</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>MM / DD / YYYY</span> </div>	
Mailing Address 6609 WILLOW PARK DRIVE SUITE 100				Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>93750.00</span> </div>	
City NAPLES		State FL		Zip Code 34109	
Purpose of Expenditure IE - Canvassing				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: LOEFFLER, KELLY, LYNN, SEN.,				Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: GA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>717807.96</span> </div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Special-General	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....  <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....  <b>(c) TOTAL</b> Independent Expenditures ..... </div> <div style="border: 1px solid black; padding: 5px; width: 250px;"> <div style="display: flex; justify-content: space-between;"> <span></span> <span>187500.00</span> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature				Date <span style="margin-left: 20px;">MM / DD / YYYY</span> <div style="display: flex; justify-content: space-around;"> <span>01</span> <span>29</span> <span>2021</span> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 200 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>STAMPEDE AMERICA</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 6609 WILLOW PARK DRIVE SUITE 100				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">93750.00</div>	
City NAPLES		State FL		Zip Code 34109	
Purpose of Expenditure IE - Canvassing				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <input type="checkbox"/> Support OSSOFF, T. JONATHAN, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>GA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">720689.41</div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>STAMPEDE AMERICA</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 6609 WILLOW PARK DRIVE SUITE 100				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">93750.00</div>	
City NAPLES		State FL		Zip Code 34109	
Purpose of Expenditure IE - Canvassing				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <input type="checkbox"/> Support WARNOCK, RAPHAEL, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>GA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">717807.96</div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-General</u>	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 60%;"> <p>(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p>(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....</p> <p>(c) <b>TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 10px;">187500.00</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature				Date <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 201 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00053553         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>CITY OF GAINESVILLE PARKS AND RECREATION</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            12 / 02 / 2020         </div>	
Mailing Address <b>830 GREEN STREET NE</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           125.00         </div>	
City <b>GAINESVILLE</b>	State <b>GA</b>	Zip Code <b>30501</b>	<b>Transaction ID : 83285898</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            12 / 02 / 2020         </div>
Purpose of Expenditure <b>IE - Event Space Rental</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <b>PERDUE, DAVID, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">514536.57</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>CITY OF GAINESVILLE PARKS AND RECREATION</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            12 / 02 / 2020         </div>	
Mailing Address <b>830 GREEN STREET NE</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           125.00         </div>	
City <b>GAINESVILLE</b>	State <b>GA</b>	Zip Code <b>30501</b>	<b>Transaction ID : 83285899</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            12 / 02 / 2020         </div>
Purpose of Expenditure <b>IE - Event Space Rental</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">511655.13</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">250.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Owens, G, , Robert,*

Signature

*[Electronically Filed]*

Date 

M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2021

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 202 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00053553         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>CITY OF GAINESVILLE PARKS AND RECREATION</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>12 / 02 / 2020</div> </div>	
Mailing Address <b>830 GREEN STREET NE</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">125.00</div>	
City <b>GAINESVILLE</b>	State <b>GA</b>	Zip Code <b>30501</b>	<b>Transaction ID : 83285900</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>12 / 02 / 2020</div> </div>
Purpose of Expenditure <b>IE - Event Space Rental</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <b>OSSOFF, T. JONATHAN, , ,</b>		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">514536.57</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>CITY OF GAINESVILLE PARKS AND RECREATION</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>12 / 02 / 2020</div> </div>	
Mailing Address <b>830 GREEN STREET NE</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">125.00</div>	
City <b>GAINESVILLE</b>	State <b>GA</b>	Zip Code <b>30501</b>	<b>Transaction ID : 83285901</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>12 / 02 / 2020</div> </div>
Purpose of Expenditure <b>IE - Event Space Rental</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <b>WARNOCK, RAPHAEL, , ,</b>		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">511655.13</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">250.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

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*Owens, G. , Robert,*

Signature

*[Electronically Filed]*

Date 

/  /

01 / 29 / 2021

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 203 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> C00053553 </div>
--	--

Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report	New report	Amends report filed on	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
--	------------	------------------------	---

Full Name of Payee <input type="checkbox"/> Memo Item <b>CITY OF MORROW</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1500 MORROW STREET</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">535.95</div>	
City <b>MORROW</b>	State <b>GA</b>	Zip Code <b>30260</b>	<b>Transaction ID : 83331968</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>IE - Event Space Rental</b>		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>PERDUE, DAVID, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">959344.24</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>CITY OF MORROW</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1500 MORROW STREET</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">535.95</div>	
City <b>MORROW</b>	State <b>GA</b>	Zip Code <b>30260</b>	<b>Transaction ID : 83331969</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>IE - Event Space Rental</b>		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">956462.77</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1071.90</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Owens, G, , Robert,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 204 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00053553         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>				
Full Name of Payee <input type="checkbox"/> Memo Item <b>CITY OF MORROW</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 16 / 2020	
Mailing Address 1500 MORROW STREET			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">535.95</div>	
City MORROW	State GA	Zip Code 30260	<b>Transaction ID : 83331970</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 16 / 2020	
Purpose of Expenditure IE - Event Space Rental		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: OSSOFF, T. JONATHAN, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: GA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">959344.24</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	
Full Name of Payee <input type="checkbox"/> Memo Item <b>CITY OF MORROW</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 16 / 2020	
Mailing Address 1500 MORROW STREET			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">535.95</div>	
City MORROW	State GA	Zip Code 30260	<b>Transaction ID : 83331971</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 16 / 2020	
Purpose of Expenditure IE - Event Space Rental		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: WARNOCK, RAPHAEL, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: GA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">956462.77</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Special-General	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1071.90</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Owens, G, , Robert, Signature			Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 01 / 29 / 2021	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 205 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> <span>C00053553</span> </div>
--	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>HILTON GARDEN INN</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>12 / 03 / 2020</span> </div>	
Mailing Address <b>101 SOUTH FRONT STREET</b>				
City <b>ALBANY</b>	State <b>GA</b>	Zip Code <b>31701</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 10px;">212.13</span> </div>	
Purpose of Expenditure <b>IE - Event Space Rental</b>			Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>PERDUE, DAVID, ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 10px;">517211.39</span> </div>	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>12 / 03 / 2020</span> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>HILTON GARDEN INN</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>12 / 03 / 2020</span> </div>	
Mailing Address <b>101 SOUTH FRONT STREET</b>				
City <b>ALBANY</b>	State <b>GA</b>	Zip Code <b>31701</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 10px;">212.13</span> </div>	
Purpose of Expenditure <b>IE - Event Space Rental</b>			Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 10px;">514329.94</span> </div>	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>12 / 03 / 2020</span> </div>	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 10px;">424.26</span> </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 10px;"></span> </div>
(c) TOTAL Independent Expenditures .....	▶ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 10px;"></span> </div>

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Owens, G, , Robert,

[Electronically Filed]

Date

 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2021

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 206 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>HILTON GARDEN INN</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>MM / DD / YYYY</span> </div>	
Mailing Address <b>101 SOUTH FRONT STREET</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">212.13</div>	
City <b>ALBANY</b>		State <b>GA</b>		Zip Code <b>31701</b>	
Purpose of Expenditure <b>IE - Event Space Rental</b>				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <b>OSSOFF, T. JONATHAN, , ,</b>				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">517211.39</div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>HILTON GARDEN INN</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>MM / DD / YYYY</span> </div>	
Mailing Address <b>101 SOUTH FRONT STREET</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">212.12</div>	
City <b>ALBANY</b>		State <b>GA</b>		Zip Code <b>31701</b>	
Purpose of Expenditure <b>IE - Event Space Rental</b>				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <b>WARNOCK, RAPHAEL, , ,</b>				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">514329.94</div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">424.25</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(c) TOTAL</b> Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature				Date <span style="margin-left: 20px;">MM / DD / YYYY</span> <div style="display: flex; justify-content: space-around;"> <span>01</span> <span>29</span> <span>2021</span> </div>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 207 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00053553         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>RAMADA AUGUSTA DOWNTOWN HOTEL &amp; CONFERENCE CENTER</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>12 / 01 / 2020</div> </div>	
Mailing Address <b>640 BROAD STREET</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">313.75</div>	
City AUGUSTA	State GA	Zip Code 30901	<b>Transaction ID : 83285903</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>12 / 01 / 2020</div> </div>
Purpose of Expenditure IE - Event Space Rental		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: PERDUE, DAVID, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General State: GA	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">515164.07</div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>RAMADA AUGUSTA DOWNTOWN HOTEL &amp; CONFERENCE CENTER</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>12 / 01 / 2020</div> </div>	
Mailing Address <b>640 BROAD STREET</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">313.75</div>	
City AUGUSTA	State GA	Zip Code 30901	<b>Transaction ID : 83285904</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>12 / 01 / 2020</div> </div>
Purpose of Expenditure IE - Event Space Rental		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: LOEFFLER, KELLY, LYNN, SEN.,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General State: GA	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">512282.63</div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Special-General	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">627.50</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Owens, G., Robert,*

Signature

*[Electronically Filed]*

Date 

/  /

01 / 29 / 2021

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 208 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>RAMADA AUGUSTA DOWNTOWN HOTEL &amp; CONFERENCE CENTER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>640 BROAD STREET</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">313.75</div>		
City <b>AUGUSTA</b>	State <b>GA</b>	Zip Code <b>30901</b>	<b>Transaction ID : 83285905</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - Event Space Rental</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>OSSOFF, T. JONATHAN, , ,</b>			Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">515164.07</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>		
Full Name of Payee <input type="checkbox"/> Memo Item <b>RAMADA AUGUSTA DOWNTOWN HOTEL &amp; CONFERENCE CENTER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>640 BROAD STREET</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">313.75</div>		
City <b>AUGUSTA</b>	State <b>GA</b>	Zip Code <b>30901</b>	<b>Transaction ID : 83285906</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - Event Space Rental</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>WARNOCK, RAPHAEL, , ,</b>			Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">512282.63</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">627.50</div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
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Owens, G, , Robert, Signature		<b>[Electronically Filed]</b>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 209 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>					
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>SAVANNAH CONVENTION CENTER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>MM / DD / YYYY</span> </div>	
Mailing Address <b>P.O. BOX 248</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">200.00</div>	
City <b>SAVANNAH</b>		State <b>GA</b>		Zip Code <b>31402</b>	
Purpose of Expenditure <b>IE - Event Space Rental</b>				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <b>PERDUE, DAVID, , ,</b>				Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">958268.20</div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>SAVANNAH CONVENTION CENTER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>MM / DD / YYYY</span> </div>	
Mailing Address <b>P.O. BOX 248</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">200.00</div>	
City <b>SAVANNAH</b>		State <b>GA</b>		Zip Code <b>31402</b>	
Purpose of Expenditure <b>IE - Event Space Rental</b>				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>				Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">955386.73</div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">400.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(c) TOTAL</b> Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Owens, G, , Robert,</u>				Date <span style="margin-left: 20px;">MM / DD / YYYY</span> <div style="display: flex; justify-content: space-around;"> <span>01</span> <span>29</span> <span>2021</span> </div>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 210 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>SAVANNAH CONVENTION CENTER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>P.O. BOX 248</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">200.00</div>		
City <b>SAVANNAH</b>	State <b>GA</b>	Zip Code <b>31402</b>	<b>Transaction ID : 83326028</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - Event Space Rental</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>OSSOFF, T. JONATHAN, , ,</b>			Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">958268.20</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>		
Full Name of Payee <input type="checkbox"/> Memo Item <b>SAVANNAH CONVENTION CENTER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>P.O. BOX 248</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">200.00</div>		
City <b>SAVANNAH</b>	State <b>GA</b>	Zip Code <b>31402</b>	<b>Transaction ID : 83326029</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - Event Space Rental</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>WARNOCK, RAPHAEL, , ,</b>			Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">955386.73</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">400.00</div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, Signature		<b>[Electronically Filed]</b>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 211 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 29 / 2020	
Mailing Address <b>29374 NETWORK PLACE</b>				Amount <span style="border: 1px solid black; padding: 2px;">4005.69</span>	
City <b>CHICAGO</b>		State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83256284</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 29 / 2020	
Purpose of Expenditure <b>IE - P2P Texting</b>			Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>PERDUE, DAVID, , ,</b>				Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">513004.58</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 29 / 2020	
Mailing Address <b>29374 NETWORK PLACE</b>				Amount <span style="border: 1px solid black; padding: 2px;">4005.69</span>	
City <b>CHICAGO</b>		State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83256291</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 29 / 2020	
Purpose of Expenditure <b>IE - P2P Texting</b>			Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>LOEFFLER, KELLY, LYNN, SEN.,</b>				Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">510123.14</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>				<span style="border: 1px solid black; padding: 2px;">8011.38</span>	
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>				<span style="border: 1px solid black; padding: 2px;"></span>	
<b>(c) TOTAL Independent Expenditures .....</b>				<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 01 / 29 / 2021	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00053553</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <b>I360, LLC</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">686.82</div>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83283634</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>PERDUE, DAVID, ,</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">513691.40</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶    Runoff		
Full Name of Payee <b>I360, LLC</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">686.82</div>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83283684</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">510809.96</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶    Special-General		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;">1373.64</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(c) TOTAL Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 213 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>New report</b> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 02 / 2020	
Mailing Address <b>29374 NETWORK PLACE</b>				Amount <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;">595.17</span>	
City <b>CHICAGO</b>		State <b>IL</b>		Zip Code <b>60673-1293</b>	
Purpose of Expenditure <b>IE - P2P Texting</b>				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>PERDUE, DAVID, ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;">514536.57</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 02 / 2020	
Mailing Address <b>29374 NETWORK PLACE</b>				Amount <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;">595.17</span>	
City <b>CHICAGO</b>		State <b>IL</b>		Zip Code <b>60673-1293</b>	
Purpose of Expenditure <b>IE - P2P Texting</b>				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;">511655.13</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....  <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....  <b>(c) TOTAL</b> Independent Expenditures ..... </div> <div style="border: 1px solid black; padding: 5px; width: 250px;"> 1190.34 </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 29 / 2021	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 214 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <b>I360, LLC</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1623.06</div>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83290929</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>PERDUE, DAVID, ,</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">517211.39</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>		
Full Name of Payee <b>I360, LLC</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1623.06</div>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83290930</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">514329.94</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;">3246.12</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(c) TOTAL Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature		<b>[Electronically Filed]</b>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <b>I360, LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">05</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10501.47</div>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83291960</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">05</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="margin-top: 5px;"> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose </div> <div>           Office Sought:    <input type="checkbox"/> House    District: _____  <input type="checkbox"/> President    <input checked="" type="checkbox"/> Senate    State: <b>GA</b> </div> </div>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">527712.86</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>		
Full Name of Payee <b>I360, LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">05</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10501.47</div>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83291961</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">05</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="margin-top: 5px;"> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose </div> <div>           Office Sought:    <input type="checkbox"/> House    District: _____  <input type="checkbox"/> President    <input checked="" type="checkbox"/> Senate    State: <b>GA</b> </div> </div>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">524831.41</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">21002.94</div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature		<b>[Electronically Filed]</b>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">29</div> <div style="border: 1px solid black; padding: 2px;">2021</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 216 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;">           New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 08 / 2020		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">22.68</span>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83300055</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 08 / 2020		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: <b>PERDUE, DAVID, ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">934615.44</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>		
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 08 / 2020		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">22.68</span>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83300056</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 08 / 2020		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">931733.98</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p><b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....</p> <p><b>(c) TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">45.36</span> <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;"> </span> <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;"> </span> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature			<div style="display: flex; justify-content: space-between; align-items: center;"> <div> <b>[Electronically Filed]</b>            Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>            01 / 29 / 2021         </div> </div>		



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 217 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>					
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>I360, LLC</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> <div style="display: flex; justify-content: space-between;"> <span>12 / 12 / 2020</span> </div>	
Mailing Address <b>29374 NETWORK PLACE</b>				Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">9006.57</span> </div>	
City <b>CHICAGO</b>		State <b>IL</b>		Zip Code <b>60673-1293</b>	
Purpose of Expenditure <b>IE - P2P Texting</b>				Category/Type <span style="border: 1px solid black; padding: 2px;"><b>004</b></span>	
Name of Federal Candidate: <b>PERDUE, DAVID, ,</b>				Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">952497.51</span> </span>					

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 218 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 14 / 2020	
Mailing Address <b>29374 NETWORK PLACE</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3189.96</div>	
City <b>CHICAGO</b>		State <b>IL</b>		Zip Code <b>60673-1293</b>	
Purpose of Expenditure <b>IE - P2P Texting</b>				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>PERDUE, DAVID, ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">955687.47</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 14 / 2020	
Mailing Address <b>29374 NETWORK PLACE</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3189.96</div>	
City <b>CHICAGO</b>		State <b>IL</b>		Zip Code <b>60673-1293</b>	
Purpose of Expenditure <b>IE - P2P Texting</b>				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">952806.00</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....  <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....  <b>(c) TOTAL</b> Independent Expenditures ..... </div> <div style="border: 1px solid black; padding: 5px; width: 200px; text-align: right;"> 6379.92 </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 01 / 29 / 2021	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 219 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2180.73</div>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83326031</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>PERDUE, DAVID, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input type="checkbox"/> General    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">958268.20</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>		
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2180.73</div>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83326032</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input type="checkbox"/> General    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">955386.73</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">4361.46</div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, Signature		<b>[Electronically Filed]</b>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">29</div> <div style="border: 1px solid black; padding: 2px;">2021</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 220 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 16 / 2020	
Mailing Address <b>29374 NETWORK PLACE</b>				Amount <span style="border: 1px solid black; padding: 2px;">4.14</span>	
City <b>CHICAGO</b>		State <b>IL</b>		Zip Code <b>60673-1293</b>	
Purpose of Expenditure <b>IE - P2P Texting</b>				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>PERDUE, DAVID, ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">959344.24</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 16 / 2020	
Mailing Address <b>29374 NETWORK PLACE</b>				Amount <span style="border: 1px solid black; padding: 2px;">4.14</span>	
City <b>CHICAGO</b>		State <b>IL</b>		Zip Code <b>60673-1293</b>	
Purpose of Expenditure <b>IE - P2P Texting</b>				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">956462.77</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px;">8.28</span> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px;"> </span> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(c) TOTAL</b> Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px;"> </span> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;"> <i>Owens, G., Robert,</i>            Signature </div> <div style="width: 20%; text-align: center;"> <i>[Electronically Filed]</i> </div> <div style="width: 40%; text-align: right;">           Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>  01 / 29 / 2021 </div> </div>					

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 221 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>New report</b> Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <b>I360, LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">18</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>		
Mailing Address 29374 NETWORK PLACE			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">566.82</div>		
City CHICAGO	State IL	Zip Code 60673-1293	<b>Transaction ID : 83336197</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">18</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>		
Purpose of Expenditure IE - P2P Texting		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	Name of Federal Candidate: <div style="display: flex; justify-content: space-between; align-items: center;"> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose </div>		
Name of Federal Candidate: PERDUE, DAVID, ,		Office Sought: <div style="display: flex; justify-content: space-between; align-items: center;"> <input type="checkbox"/> House    District: _____  <input type="checkbox"/> President    <input checked="" type="checkbox"/> Senate    State: <u>GA</u> </div>			
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">960786.06</div>		Disbursement For: <div style="display: flex; justify-content: space-between; align-items: center;"> <input type="checkbox"/> Primary    <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u> </div>	
Full Name of Payee <b>I360, LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">18</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>		
Mailing Address 29374 NETWORK PLACE			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">566.82</div>		
City CHICAGO	State IL	Zip Code 60673-1293	<b>Transaction ID : 83336198</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">18</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>		
Purpose of Expenditure IE - P2P Texting		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	Name of Federal Candidate: <div style="display: flex; justify-content: space-between; align-items: center;"> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose </div>		
Name of Federal Candidate: LOEFFLER, KELLY, LYNN, SEN.,		Office Sought: <div style="display: flex; justify-content: space-between; align-items: center;"> <input type="checkbox"/> House    District: _____  <input type="checkbox"/> President    <input checked="" type="checkbox"/> Senate    State: <u>GA</u> </div>			
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">957904.59</div>		Disbursement For: <div style="display: flex; justify-content: space-between; align-items: center;"> <input type="checkbox"/> Primary    <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-General</u> </div>	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">1133.64</div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, Signature		<b>[Electronically Filed]</b>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">29</div> <div style="border: 1px solid black; padding: 2px;">2021</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>New report</b> Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <b>I360, LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>12</div> <div>19</div> <div>2020</div> </div>		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1937.97</div>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83336215</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>12</div> <div>19</div> <div>2020</div> </div>		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <div style="display: flex; align-items: center; margin-left: 10px;"> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose </div>		
Name of Federal Candidate: <b>PERDUE, DAVID, ,</b>		Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">962724.03</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>		
Full Name of Payee <b>I360, LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>12</div> <div>19</div> <div>2020</div> </div>		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1937.97</div>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83336216</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>12</div> <div>19</div> <div>2020</div> </div>		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <div style="display: flex; align-items: center; margin-left: 10px;"> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose </div>		
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>		Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">959842.56</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">3875.94</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(c) TOTAL</b> Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature		<b>[Electronically Filed]</b>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>01</div> <div>29</div> <div>2021</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>					
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>I360, LLC</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> <div style="display: flex; justify-content: space-between;"> <span>12 / 20 / 2020</span> </div>	
Mailing Address <b>29374 NETWORK PLACE</b>				Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>53.79</span> </div>	
City <b>CHICAGO</b>		State <b>IL</b>		Zip Code <b>60673-1293</b>	
Purpose of Expenditure <b>IE - P2P Texting</b>				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <b>PERDUE, DAVID, , ,</b>				<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose </div> <div>           Office Sought: <input type="checkbox"/> House    District: _____  <input type="checkbox"/> President    <input checked="" type="checkbox"/> Senate    State: <b>GA</b> </div> </div>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">963442.40</div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>I360, LLC</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> <div style="display: flex; justify-content: space-between;"> <span>12 / 20 / 2020</span> </div>	
Mailing Address <b>29374 NETWORK PLACE</b>				Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>53.79</span> </div>	
City <b>CHICAGO</b>		State <b>IL</b>		Zip Code <b>60673-1293</b>	
Purpose of Expenditure <b>IE - P2P Texting</b>				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>				<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose </div> <div>           Office Sought: <input type="checkbox"/> House    District: _____  <input type="checkbox"/> President    <input checked="" type="checkbox"/> Senate    State: <b>GA</b> </div> </div>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">960560.92</div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">107.58</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(c) TOTAL</b> Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature				<div style="display: flex; justify-content: space-between;"> <div> <b>[Electronically Filed]</b> </div> <div>           Date <span style="margin-left: 20px;">MM / DD / YYYY</span>  <div style="display: flex; justify-content: space-between;"> <span>01 / 29 / 2021</span> </div> </div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00053553</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <b>I360, LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2.67</div>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83345918</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>PERDUE, DAVID, ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">1075513.14</div>		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>		
Full Name of Payee <b>I360, LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2.67</div>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83345948</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">1072631.65</div>		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">5.34</div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, Signature		<b>[Electronically Filed]</b>		Date	
				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">29</div> <div style="border: 1px solid black; padding: 2px;">2021</div> </div>	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00053553       </div>										
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>New report</b> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>														
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 28 / 2020										
Mailing Address <b>29374 NETWORK PLACE</b>				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1596.39</div>										
City <b>CHICAGO</b>		State <b>IL</b>		Zip Code <b>60673-1293</b>										
Purpose of Expenditure <b>IE - P2P Texting</b>				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>										
Name of Federal Candidate: <b>PERDUE, DAVID, , ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: <b>GA</b>										
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">1081249.58</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>										
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 28 / 2020										
Mailing Address <b>29374 NETWORK PLACE</b>				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1596.39</div>										
City <b>CHICAGO</b>		State <b>IL</b>		Zip Code <b>60673-1293</b>										
Purpose of Expenditure <b>IE - P2P Texting</b>				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>										
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: <b>GA</b>										
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">1078368.08</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>										
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....</td> <td style="width: 5%; text-align: center;">▶</td> <td style="width: 35%; border: 1px solid black; padding: 5px; text-align: right;">3192.78</td> </tr> <tr> <td>(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 5px; text-align: right;"> </td> </tr> <tr> <td>(c) <b>TOTAL</b> Independent Expenditures .....</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 5px; text-align: right;"> </td> </tr> </table>						(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	▶	3192.78	(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶		(c) <b>TOTAL</b> Independent Expenditures .....	▶	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	▶	3192.78												
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶													
(c) <b>TOTAL</b> Independent Expenditures .....	▶													
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.														
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;">           Owens, G, , Robert,            _____            Signature         </div> <div style="width: 20%; text-align: center;"> <b>[Electronically Filed]</b> </div> <div style="width: 30%; text-align: right;">           Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>            01 / 29 / 2021         </div> </div>														

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 226 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>New report</b> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 30 / 2020	
Mailing Address <b>29374 NETWORK PLACE</b>				Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1; border-bottom: 1px solid black;"></span> 4119.93 </div>	
City <b>CHICAGO</b>		State <b>IL</b>		Zip Code <b>60673-1293</b>	
Purpose of Expenditure <b>IE - P2P Texting</b>				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>PERDUE, DAVID, , ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1; border-bottom: 1px solid black;"></span> 1085369.51 </span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 30 / 2020	
Mailing Address <b>29374 NETWORK PLACE</b>				Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1; border-bottom: 1px solid black;"></span> 4119.93 </div>	
City <b>CHICAGO</b>		State <b>IL</b>		Zip Code <b>60673-1293</b>	
Purpose of Expenditure <b>IE - P2P Texting</b>				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1; border-bottom: 1px solid black;"></span> 1082488.01 </span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1; border-bottom: 1px solid black;"></span> 8239.86 </span> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1; border-bottom: 1px solid black;"></span> </span> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(c) TOTAL</b> Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1; border-bottom: 1px solid black;"></span> </span> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 01 / 29 / 2021	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 227 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1399.47</div>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83371086</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>PERDUE, DAVID, ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1086768.98</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>		
Full Name of Payee <input type="checkbox"/> Memo Item <b>I360, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>29374 NETWORK PLACE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1399.47</div>		
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60673-1293</b>	<b>Transaction ID : 83371087</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>IE - P2P Texting</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1083887.48</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">2798.94</div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, Signature		<b>[Electronically Filed]</b>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>											
Full Name of Payee <input type="checkbox"/> Memo Item <b>PROLIST INC.</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 07 / 2020							
Mailing Address    4510 BUCKEYSTOWN PIKE, SUITE M				Amount <span style="border: 1px solid black; padding: 2px;">213903.35</span>							
City <b>FREDERICK</b>		State <b>MD</b>		Zip Code <b>21704-7539</b>							
Purpose of Expenditure IE - Endorsement Postcards				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: <b>PERDUE, DAVID, ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">934592.76</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>							
Full Name of Payee <input type="checkbox"/> Memo Item <b>PROLIST INC.</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 07 / 2020							
Mailing Address    4510 BUCKEYSTOWN PIKE, SUITE M				Amount <span style="border: 1px solid black; padding: 2px;">213903.34</span>							
City <b>FREDERICK</b>		State <b>MD</b>		Zip Code <b>21704-7539</b>							
Purpose of Expenditure IE - Endorsement Postcards				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">931711.30</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>							
<table style="width: 100%;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width: 40%; text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;">427806.69</span></td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> <tr> <td>(c) TOTAL Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">427806.69</span>	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <span style="border: 1px solid black; padding: 2px;"></span>	(c) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>
(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">427806.69</span>										
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
(c) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;">           Owens, G, , Robert,            _____            Signature         </div> <div style="width: 20%; text-align: center;"> <b>[Electronically Filed]</b> </div> <div style="width: 30%; text-align: right;">           Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>            01 / 29 / 2021         </div> </div>											

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 229 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>New report</b> Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <b>PROLIST INC.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">22</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>		
Mailing Address <b>4510 BUCKEYSTOWN PIKE, SUITE M</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">111193.07</div>		
City <b>FREDERICK</b>	State <b>MD</b>	Zip Code <b>21704-7539</b>	<b>Transaction ID : 83345829</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">22</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>		
Purpose of Expenditure <b>IE - Endorsement Postcards</b>		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Name of Federal Candidate: <div style="display: flex; justify-content: space-between; align-items: center;"> <input checked="" type="checkbox"/> Support    <input type="checkbox"/> Oppose </div>		
Name of Federal Candidate: <b>PERDUE, DAVID, , ,</b>		Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>			
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">1075510.47</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	
Full Name of Payee <b>PROLIST INC.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">22</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>		
Mailing Address <b>4510 BUCKEYSTOWN PIKE, SUITE M</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">111193.06</div>		
City <b>FREDERICK</b>	State <b>MD</b>	Zip Code <b>21704-7539</b>	<b>Transaction ID : 83345830</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">22</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>		
Purpose of Expenditure <b>IE - Endorsement Postcards</b>		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Name of Federal Candidate: <div style="display: flex; justify-content: space-between; align-items: center;"> <input checked="" type="checkbox"/> Support    <input type="checkbox"/> Oppose </div>		
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>		Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>			
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">1072628.98</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">222386.13</div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature		<b>[Electronically Filed]</b>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">29</div> <div style="border: 1px solid black; padding: 2px;">2021</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 230 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right;">           New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>MASTER PRINT, INC.</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> </div>		
Mailing Address <b>P.O. BOX 1467</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="border: 1px solid black; padding: 2px;">704.81</span> </div>		
City <b>NEWINGTON</b>	State <b>VA</b>	Zip Code <b>22122</b>	<b>Transaction ID : 83219645</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> </div>		
Purpose of Expenditure <b>IE - Palm Cards</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> </div>		
Name of Federal Candidate: <b>PERDUE, DAVID, ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">506874.31</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>		
Full Name of Payee <input type="checkbox"/> Memo Item <b>MASTER PRINT, INC.</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> </div>		
Mailing Address <b>P.O. BOX 1467</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="border: 1px solid black; padding: 2px;">704.80</span> </div>		
City <b>NEWINGTON</b>	State <b>VA</b>	Zip Code <b>22122</b>	<b>Transaction ID : 83219646</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> </div>		
Purpose of Expenditure <b>IE - Palm Cards</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> </div>		
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">503992.88</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="border: 1px solid black; padding: 2px;">1409.61</span> </div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="border: 1px solid black; padding: 2px;"> </span> </div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="border: 1px solid black; padding: 2px;"> </span> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, Signature		<b>[Electronically Filed]</b>		Date <span style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> </span>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 231 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>MASTER PRINT, INC.</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>MM / DD / YYYY</span> </div>	
Mailing Address <b>P.O. BOX 1467</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">568.50</div>	
City <b>NEWINGTON</b>		State <b>VA</b>		Zip Code <b>22122</b>	
Purpose of Expenditure <b>IE - Postcards</b>				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: <b>PERDUE, DAVID, ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">720689.41</div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>MASTER PRINT, INC.</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>MM / DD / YYYY</span> </div>	
Mailing Address <b>P.O. BOX 1467</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">568.50</div>	
City <b>NEWINGTON</b>		State <b>VA</b>		Zip Code <b>22122</b>	
Purpose of Expenditure <b>IE - Postcards</b>				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">717807.96</div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....  <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....  <b>(c) TOTAL</b> Independent Expenditures ..... </div> <div style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">1137.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature				Date <span style="margin-left: 20px;">MM / DD / YYYY</span> <div style="display: flex; justify-content: space-around;"> <span>01</span> <span>29</span> <span>2021</span> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 232 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>MASTER PRINT, INC.</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 08 / 2020	
Mailing Address P.O. BOX 1467				Amount <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;">319.49</span>	
City NEWINGTON		State VA		Zip Code 22122	
Purpose of Expenditure IE - Postcards				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: PERDUE, DAVID, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: GA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;">940543.33</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	
Full Name of Payee <input type="checkbox"/> Memo Item <b>MASTER PRINT, INC.</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 08 / 2020	
Mailing Address P.O. BOX 1467				Amount <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;">319.49</span>	
City NEWINGTON		State VA		Zip Code 22122	
Purpose of Expenditure IE - Postcards				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: LOEFFLER, KELLY, LYNN, SEN.,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: GA	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;">937661.87</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Special-General	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;">638.98</span> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;"> </span> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(c) TOTAL</b> Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;"> </span> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 29 / 2021	

[Electronically Filed]



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 233 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>MASTER PRINT, INC.</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>P.O. BOX 1467</b>				Amount <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">2804.20</div>	
City <b>NEWINGTON</b>		State <b>VA</b>		Zip Code <b>22122</b>	
Purpose of Expenditure <b>IE - Door Hangers</b>				Category/Type <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">004</div>	
Name of Federal Candidate: <b>PERDUE, DAVID, , ,</b>				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">940543.33</div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>MASTER PRINT, INC.</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>P.O. BOX 1467</b>				Amount <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">2804.20</div>	
City <b>NEWINGTON</b>		State <b>VA</b>		Zip Code <b>22122</b>	
Purpose of Expenditure <b>IE - Door Hangers</b>				Category/Type <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">004</div>	
Name of Federal Candidate: <b>OSSOFF, T. JONATHAN, , ,</b>				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">940543.33</div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">5608.40</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(c) TOTAL Independent Expenditures .....</b> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, _____ Signature				<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">[Electronically Filed]</div> <div style="text-align: center;">         Date <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">01 / 29 / 2021</div> </div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 234 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>MASTER PRINT, INC.</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>P.O. BOX 1467</b>				Amount <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">2804.20</div>	
City <b>NEWINGTON</b>		State <b>VA</b>		Zip Code <b>22122</b>	
Purpose of Expenditure <b>IE - Door Hangers</b>				Category/Type <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">004</div>	
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>				<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose </div> <div>           Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate  <input type="checkbox"/> President <input type="checkbox"/> General </div> <div>           District: _____            State: <b>GA</b> </div> </div>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">937661.87</div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>MASTER PRINT, INC.</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>P.O. BOX 1467</b>				Amount <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">2804.20</div>	
City <b>NEWINGTON</b>		State <b>VA</b>		Zip Code <b>22122</b>	
Purpose of Expenditure <b>IE - Door Hangers</b>				Category/Type <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">004</div>	
Name of Federal Candidate: <b>WARNOCK, RAPHAEL, ,</b>				<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support  <input checked="" type="checkbox"/> Oppose </div> <div>           Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate  <input type="checkbox"/> President <input type="checkbox"/> General </div> <div>           District: _____            State: <b>GA</b> </div> </div>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">937661.87</div>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special-General</b>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">5608.40</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(c) TOTAL</b> Independent Expenditures ..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Owens, G., Robert,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

Date

01 / 29 / 2021

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 235 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00053553         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>NATIONAL RIFLE ASSOCIATION OF AMERICA</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 30 / 2020         </div>	
Mailing Address <b>11250 WAPLES MILL ROAD</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2124.58         </div>	
City <b>FAIRFAX</b>	State <b>VA</b>	Zip Code <b>22030</b>	<b>Transaction ID : 83256136</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 30 / 2020         </div>
Purpose of Expenditure <b>IE - salaries and taxes (Nov 30 - Dec 6, 2020)</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: <b>PERDUE, DAVID, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">508998.89</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>NATIONAL RIFLE ASSOCIATION OF AMERICA</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 30 / 2020         </div>	
Mailing Address <b>11250 WAPLES MILL ROAD</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2124.57         </div>	
City <b>FAIRFAX</b>	State <b>VA</b>	Zip Code <b>22030</b>	<b>Transaction ID : 83256137</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 30 / 2020         </div>
Purpose of Expenditure <b>IE - salaries and taxes (Nov 30 - Dec 6, 2020)</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">506117.45</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">4249.15</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Owens, G, , Robert, [Electronically Filed]  
 Signature Date 

M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2021

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 236 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>NATIONAL RIFLE ASSOCIATION OF AMERICA</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>11250 WAPLES MILL ROAD</b>				Amount <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div>	
City <b>FAIRFAX</b>		State <b>VA</b>		Zip Code <b>22030</b>	
Purpose of Expenditure IE - salaries and taxes (December 7-13, 2020)				Transaction ID : <b>83292117</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>PERDUE, DAVID, , ,</b>				Category/Type <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">004</div>	
Name of Federal Candidate: <b>PERDUE, DAVID, , ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <b>529995.91</b>	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>NATIONAL RIFLE ASSOCIATION OF AMERICA</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>11250 WAPLES MILL ROAD</b>				Amount <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div>	
City <b>FAIRFAX</b>		State <b>VA</b>		Zip Code <b>22030</b>	
Purpose of Expenditure IE - salaries and taxes (December 7-13, 2020)				Transaction ID : <b>83292118</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>				Category/Type <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">004</div>	
Name of Federal Candidate: <b>LOEFFLER, KELLY, LYNN, SEN.,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <b>527114.46</b>	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <b>4566.10</b> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(c) TOTAL Independent Expenditures .....</b> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;">         Owens, G, , Robert,          _____          Signature       </div> <div style="width: 20%; text-align: center;"> <b>[Electronically Filed]</b> </div> <div style="width: 40%; text-align: right;">         Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</div> </div> </div> </div>					

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 237 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Full Name of Payee <b>NATIONAL RIFLE ASSOCIATION OF AMERICA</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Mailing Address    11250 WAPLES MILL ROAD			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2947.61</div>		
City FAIRFAX	State VA	Zip Code 22030	<b>Transaction ID : 83313813</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Purpose of Expenditure IE - salaries and taxes (December 14-20, 2020)		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Name of Federal Candidate: PERDUE, DAVID, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>GA</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">943490.94</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶    Runoff		
Full Name of Payee <b>NATIONAL RIFLE ASSOCIATION OF AMERICA</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Mailing Address    11250 WAPLES MILL ROAD			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2947.60</div>		
City FAIRFAX	State VA	Zip Code 22030	<b>Transaction ID : 83313814</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Purpose of Expenditure IE - salaries and taxes (December 14-20, 2020)		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Name of Federal Candidate: LOEFFLER, KELLY, LYNN, SEN.,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>GA</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">940609.47</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶    Special-General		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">5895.21</div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, Signature		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00053553 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Full Name of Payee <b>NATIONAL RIFLE ASSOCIATION OF AMERICA</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Mailing Address 11250 WAPLES MILL ROAD			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">664.58</div>		
City FAIRFAX	State VA	Zip Code 22030	<b>Transaction ID : 83339322</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Purpose of Expenditure IE - salaries and taxes (December 21-27, 2020)		Category/ Type	<div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		
Name of Federal Candidate: PERDUE, DAVID, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: <u>GA</u>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">963388.61</div>		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶			Runoff		
Full Name of Payee <b>NATIONAL RIFLE ASSOCIATION OF AMERICA</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Mailing Address 11250 WAPLES MILL ROAD			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">664.57</div>		
City FAIRFAX	State VA	Zip Code 22030	<b>Transaction ID : 83339323</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Purpose of Expenditure IE - salaries and taxes (December 21-27, 2020)		Category/ Type	<div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		
Name of Federal Candidate: LOEFFLER, KELLY, LYNN, SEN.,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: <u>GA</u>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">960507.13</div>		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶			Special-General		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;">1329.15</div>		
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(c) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Owens, G, , Robert, Signature		[Electronically Filed]		Date	
<div style="border: 1px solid black; padding: 2px; text-align: center;">01</div>		<div style="border: 1px solid black; padding: 2px; text-align: center;">29</div>		<div style="border: 1px solid black; padding: 2px; text-align: center;">2021</div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 239 OF 239  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00053553       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>NATIONAL RIFLE ASSOCIATION OF AMERICA</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 28 / 2020	
Mailing Address 11250 WAPLES MILL ROAD		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4140.05</div>	
City FAIRFAX	State VA	Zip Code 22030	<b>Transaction ID : 83366361</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 28 / 2020
Purpose of Expenditure IE - salaries and taxes (12/28/20 to 1/3/21)		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate: PERDUE, DAVID, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1081249.58</div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>NATIONAL RIFLE ASSOCIATION OF AMERICA</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 28 / 2020	
Mailing Address 11250 WAPLES MILL ROAD		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4140.04</div>	
City FAIRFAX	State VA	Zip Code 22030	<b>Transaction ID : 83366362</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 28 / 2020
Purpose of Expenditure IE - salaries and taxes (12/28/20 to 1/3/21)		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate: LOEFFLER, KELLY, LYNN, SEN.,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1078368.08</div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Special-General	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">8280.09</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1161198.88</div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Owens, G, , Robert, [Electronically Filed]  
 Signature

Date MM / DD / YYYY  
 01 / 29 / 2021